

2004
**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000047418

1. Entity Name
AMY WIND, INC.



Principal Place of Business
7583 NW 60TH LANE
PARKLAND FL 33067

Mailing Address
7583 NW 60TH LANE
PARKLAND FL 33067

FILED

04 SEP 10 PM 2:55

SECRETARY OF STATE
TALLAHASSEE FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0757083

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WIND, AMY
390 RACQUET CLUB DR. BLVD. 126, #205
FT. LAUDERDALE FL 33326

Name Wind, Amy
Street Address (P.O. Box Number is Not Acceptable)
6110 NW 60th Terrace
City Parkland FL Zip Code 33067

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5:00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME WIND, AMY
STREET ADDRESS 7583 NW 60TH LN
CITY-ST-ZIP POMPANO BEACH FL 33067

TITLE ☐ Change ☐ Addition
NAME 600041012956
STREET ADDRESS 09/13/04--01072--012 **150.00
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

9/7/04

ATTACHMENT

#P97000047418 FILED

2 of 2

To Whom It May Concern,

04 SEP 10 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Due to extreme personal issue I have been out of state during the last several months.

Upon my return on Sept 2, 2004 I had still not rec'd appropriate paperwork from your offices and was unable to download necessary forms due to hurricane. (Sunbiz website is down due to Hurricane Frances and phone services were suspended in my area as well.) I was able to locate old form, as you can see, address is different and not current.

Please accept check as I have no intention to dissolve business.

Thank you in advance for your help & assistance in this matter.

Amy Wind
Amy Wind, Inc
65-0757083