

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

FILED
Sep 11, 2003 8:00 am
Secretary of State

09-11-2003 90087 039 ***150.00

DOCUMENT # P97000083108

1. Entity Name
WINDSOR RESOURCES INC.



Principal Place of Business
19596 ESTUARY DR
BOCA RATON FL 33498
US

Mailing Address
19596 ESTUARY DR
BOCA RATON FL 33498
US

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 **65-0785933**

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

KOSMIN, SCOTT
19596 ESTUARY DR
BOCA RATON FL 33498

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$550.00

After September 10, 2003 Fee will be \$750.00

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 **P** ☐ Delete
NAME **KOSMIN, SCOTT**
STREET ADDRESS **19596 ESTUARY DR**
CITY-ST-ZIP **BOCA RATON FL 33498**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/03

Date

561-477-8382

Daytime Phone #

CR2E034 (4/03)

Attachment

90156112
#P97000083108

19596 Estuary Drive
Boca Raton, FL. 33498
Phone: (561) 477-8382
Fax: (561) 470-8613
E-Mail: Windsorresources@aol.com

Windsor Resources Inc.

September 9, 2003

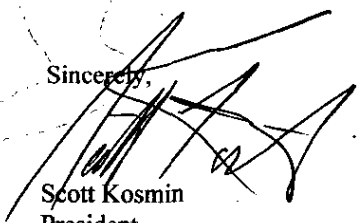
Florida Department of State
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL. 32302-1500

To Whom It May Concern,

As directed in the first notice that we received for the filing of the enclosed Uniform Business Report, I am including this letter of notification, documenting that this was the first notice we received regarding the subject report, and enclosed please find a check in the amount of \$150.00 for the filing fee, as required.

Thank you so much for your attention to this matter.

Sincerely,


Scott Kosmin
President