2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P98000013001

1. Entity Name

REX R. OLESON, INC.



Principal Place of Business 31850 SW 195TH AVE HOMESTEAD FL 33030

LOSNER, STEVEN D

65 NW 16TH ST HOMESTEAD FL 33030

Zip

Mailing Address 31850 SW 195TH AVE

HOMESTEAD FL 33030

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

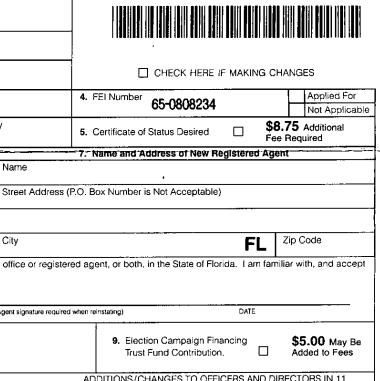
Country

6. Name and Address of Current Registered Agent

Zip

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90124 004 ***150.00



			City		F	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									
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of State				n Campaign Financing fund Contribution.		5.00 May dded to Fees		
10.	OFFICERS AND DIRECTO	PRS	11.	ADDITIONS/CH	ANGES TO OFFICERS A	AND DIREC	TORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2P OLESON, REX R 31850 SW 195TH AVE HOMESTEAD FL 33030	☐ Delete _.	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	nge □ Ada	dition	
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Country

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 PRIMTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03 306 246.078

CR2E034 (10/02)