## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)**



FILED
Mar 05, 2003 8:00 am §
Secretary of State

SERVICES INC.	JUUU2	25150			03-05-2003 90065 044 ***150.		
1815 WILEY ST 1815 WILEY		WILEY ST	·····				
go of Divisions			···				
Principal Place of Business     Mailing Addre		lling Address				1911 <b>0 6</b> 11 1 <b>0 6</b> 1	
Suite, Apt. #, etc. Suite, Apt		e, Apt. #, etc.	Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State		4	0070023490	plied For t Applicable	
Country	Zip		Country	5			
6. Name and Address of Curr	ent Registere	ed Agent	<del></del>	7			
			Name				
			Street Add	dress (P.O.	). Box Number is Not Acceptable)		
<del>DFL 33020</del> Hollys	rood F	4,33020	<b>O</b> City		<b>□</b> I Zin Code		
			• • • •		·		
amed entity submits this statemer as of registered agent.	nt for the purp	ose of changing its re	gistered office or r	egistered a	agent, or both, in the State of Florida. I am familiar with, a	ind accept	
gnature, typed or printed name of registered as	pent and title if app	licable (NOTE: 5	Jenistared Anant signature	required who	or (cholelle)		
ayable to Florida Departmen	t of State		. 100-		Trust Fund Contribution. L. Added		
	ND DIRECTO		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 11	
	Weley.		TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
Ourbeau, Yvon 611 n 17 ave Ollywood Fl 33020		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
		□ Delete _	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
	P-11.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
<del>-</del>	***	☐ Delete	TITLE NAME		☐ Change	Addition	
			STREET ADDRESS CITY-ST-ZIP		☐ citaliye		
	SERVICES INC.  of Business  . 33020  ce of Business  . etc.  Country  6. Name and Address of Curr  IERRE  AVE  D Ft \$3020  amed entity submits this statements of registered agent.  gnature, typed or print a name of registered agent.  E NOW!!! FEE IS \$150.00  lay 1, 2003 Fee will be \$550.1  ayable to Florida Department  OFFICERS A  ORTIER, PIERRE  611-N-17-AVE  OURBEAU, YVON 611 N 17 AVE	SERVICES INC.  of Business  . 33020  Ce of Business  . etc.  City  Country  Country  City  6. Name and Address of Current Registered  ERRE  AVE  D Ft 93020  Augustian Augustian Augustian Augustian  ENOW!!! FEE IS \$150.00  Tay 1, 2003 Fee will be \$550.00  Tayable to Flortida Department of State  OFFICERS AND DIRECTOR  ORTIER, PIERRE  611-N-17-AVE  OURBEAU, YVON  611 N 17 AVE	SERVICES INC.  of Business  3000  dependence of Business  4 Mailing Address 1815 WILEY ST HOLLYWOOD FL 33020  ce of Business  3. Mailing Address 4 State  Country  City & State  Country  Zip  6. Name and Address of Current Registered Agent  SERRE  AVE  BFL 9815 Wiley At  amed entity submits this statement for the purpose of changing its re as of registered agent.  ENOW!!! FEE IS \$150.00  Tay 1, 2003 Fee will be \$550.00  Tay 1, 2003 Fee Will be \$50.00  Tay 1, 200	SERVICES INC.  of Business  Mailing Address 1815 WILEY ST HOLLYWOOD FL 33020  Ce of Business  3. Mailing Address Let C.  Suite, Apt. #, etc.  City & State  Country  ERRE ANE  PST Wiley St Street Add Street Address  Street Address  City  amed entity submits this statement for the purpose of changing its registered office or not of registered agent.  PROPERTY OFFICERS AND DIRECTORS  ORTIER, PIERRE ST NAME OFFICERS AND DIRECTORS  OFFICERS AND DIRECTORS  ORTIER, PIERRE ST NAME STREET ADDRESS CITY-ST-ZIP  OURBEAU, YVON ST NAME STREET ADDRESS CITY-ST-ZIP  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Delete	SERVICES INC.  of Business  Mailing Address  1815 WILEY ST HOLLYWOOD FL 33020  ce of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  Country  END Country  Country  Country  Street Address of Current Registered Agent  For Hollywood FL, 33020  City  Street Address (P.C.  City  The Street Address (P.C.  The Street Address of City  The Street Address (P.C.  The Stree	SERVICES INC.  Of Business  Meiling Address 1915 WILEY ST  Country  April Pollut Wood FL 33020  Country  April Pollut Pol	

indicated on this report or 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 access, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR