

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90168 046 ***150.00

DOCUMENT # P98000025185

1. Entity Name
KANGA-ROO INDUSTRIES, INC.



Principal Place of Business
**722 PINELLAS BAYWAY S
#107
TIERRA VERDE FL 33715**

Mailing Address
**722 PINELLAS BAYWAY S
#107
TIERRA VERDE FL 33715**



2. Principal Place of Business

3. Mailing Address

756 Pinellas Bayway S
Suite, Apt. #, etc.

756 Pinellas Bayway S
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Tierra Verde FL

City & State
Tierra Verde FL

4. FEI Number **59-3499821**

Applied For
Not Applicable

Zip **33715** Country **USA**

Zip **33715** Country **USA**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COHEN, DAVID R
1948 IOWA AVENUE N.E.
ST. PETERSBURG FL 33703**

Name

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

756 Pinellas Bayway S

City

Tierra Verde

FL

Zip Code

33715

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 **COHEN, DAVID R**
STREET ADDRESS **722 PINELLAS BAYWAY SOUTH #107**
CITY-ST-ZIP **TIERRA VERDE FL 33715**

TITLE ☐ Change ☐ Addition
NAME **756 Pinellas Bayway S**
STREET ADDRESS **TIERRA VERDE FL 33715**
CITY-ST-ZIP **TIERRA VERDE FL 33715**

TITLE **D** ☐ Delete
NAME **COHEN, MAUREEN E**
STREET ADDRESS **722 PINELLAS BAYWAY SOUTH #107**
CITY-ST-ZIP **TIERRA VERDE FL 33715**

TITLE ☐ Change ☐ Addition
NAME **756 Pinellas Bayway S**
STREET ADDRESS **TIERRA VERDE FL 33715**
CITY-ST-ZIP **TIERRA VERDE FL 33715**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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

Date

Daytime Phone #

CR2E034 (10/02)