2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

R



05-01-2003 90761 045 ***150.00

FILED
May 01, 2003 8:00 am
Secretary of State

Entity Name ROSIE HINNEBUSCH, P.A.	3000048641
rincipal Place of Business 05 8TH ST SOUTH DOWNSTAIRS	Mailing Address 105 8TH ST SOUTH DOWNSTAIRS

BRADENTON BEACH FL 34217			BRADE	BRADENTON BEACH FL 34217								
2. Principal Place of Business			3. Maili	3. Mailing Address				!	10 211 42 111 1	#####	/1000 1101 11001	
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			4 . F	4. FEI Number 65-0851485			Applied For Not Applicable	
Zip		Country	Zip	Zip Coun			5. (i. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name	and Address of Curr	ent Registere	d Agent			7. N	lame and Address of New Re	gistered	Agent		
						Name						
HINNEBUSCH, ROSIE				Street Address (P.O. Box Number is Not Acceptable)								
2102 6TH		-										
SARASOTA FL 34237					City			FL	Zìp Code	е		
the obligat	named entity ions of regist		nt for the purpo	ose of changing its	register	ed office or regi	stered age	ent, or both, in the State of Flor	ida. I am	familiar with,	and accept	
SIGNATURE.	Signature, typed	or printed name of registered a	gent and title if appli	cable. (NOTE	: Registere	d Agent signature req	uired when re	einstating)	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 Fina Trust Fund Contribution	. [Added	00 May Be d to Fees		
10.		OFFICERS A	AND DIRECTOR	RS	11.		AD	DITIONS/CHANGES TO OFFI	CERS AND	O DIRECTOR		
TITLE	PD			☐ Delete	TITL	l l				Change	☐ Addition	
NAME .		SCH, ROSIE			NAM	II						
STREET ADDRESS CITY-ST-ZIP	2102 6TH SARASOT	STREET A FL 34237				ET ADDRESS - ST-ZIP						
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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: