

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91899 030 ***150.00

DOCUMENT # P98000054414

1. Entity Name

SMALL HOLES, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4774 North Powerline Road

3. Mailing Address
4774 North Powerline Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Pompano Beach, Florida

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Pompano Beach, Florida

4. FEI Number 65-0844310

Applied For
Not Applicable

Zip Country
33073 US

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33073 US

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Angelo, Barry & Boldt, P.A.

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

515 East Las Olas Blvd, Suite 850

City Fort Lauderdale

FL Zip Code 33301

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

January 1 - May 1 Fee is \$150.00.

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
D
Dwight E. Dykes
STREET ADDRESS
4774 North Powerline Road
CITY-ST-ZIP
Pompano Beach, Florida 33073

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IN THIS SPACE**

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 on an attachment with an address, with all other officers empowered.

SIGNATURE:

Dwight E. Dykes

Dwight E. Dykes

4/30/03

(954) 426-0002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #