

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

02-28-2003 90133 031 ***158.75

DOCUMENT # P98000066720

1. Entity Name
DANCE N' BEYOND INC.



Principal Place of Business
2462 W STALE ROAD 426
SUITE 1038
OVIEDO FL 32765
US

Mailing Address
2462 W STALE ROAD 426
SUITE 1038
OVIEDO FL 32765
US



2. Principal Place of Business

2462 W State Rd. 426

Suite, Apt. #, etc.

Suite 1040

City & State

Oviedo FL

Zip

32765

Country

US

3. Mailing Address

2462 W. State Rd. 426

Suite, Apt. #, etc.

Suite 1040

City & State

Oviedo, FL

Zip

32765

Country

US

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3524653**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

STERNER, PATRICK F
10359 SAINT IVES CT.
ORLANDO FL 32817

7. Name and Address of New Registered Agent

Name

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

City

FL

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

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

TITLE **D** ☐ Delete
NAME **STERNER, JANET M**
STREET ADDRESS **10359 SAINT IVES CT.**
CITY-ST-ZIP **ORLANDO FL 32817**

TITLE **D** ☐ Delete
NAME **STERNER, PATRICK F**
STREET ADDRESS **10359 SAINT IVES CT.**
CITY-ST-ZIP **ORLANDO FL 32817**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **Sterner, Janet M**
STREET ADDRESS **14908 Faversham Circle**
CITY-ST-ZIP **Orlando FL 32826**

TITLE **D** ☒ Change ☐ Addition
NAME **Sterner, Patrick F**
STREET ADDRESS **14908 Faversham Circle**
CITY-ST-ZIP **Orlando FL 32826**

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

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

TITLE ☐ Change ☐ Addition
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: **Patrick F Sterner**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/03 407-977-9433
Date Daytime Phone #

CR2E034 (10/02)