

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 20, 2003 8:00 am**  
**Secretary of State**

05-20-2003 90067 038 \*\*\*550.00

0315928 AV

**DOCUMENT # P98000089107**

1. Entity Name

**GIFT READY, INC.**



Principal Place of Business

**14620 SW 145 PLACE  
MIAMI FL 33186**

Mailing Address

**14620 SW 145 PLACE  
MIAMI FL 33186**

2. Principal Place of Business

**12310 SW 124 Path**

3. Mailing Address

**12310 SW 124 Path**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Miami, FL**

City & State

**Miami, FL**

Zip

**33186**

Country

**USA**

Zip

**33186**

Country

**USA**

4. FEI Number

**65-0871009**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**KELLEY, SEAN**

**14620 SW 145 PLACE  
MIAMI FL 33186**

7. Name and Address of New Registered Agent

Name

**Sean Kelley**

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

**12310 SW 124 Path**

City

**miami**

**FL**

Zip Code

**33186**

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

**Sean Kelley**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**1/13/03**

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 ☐ Delete

**P  
KELLEY, SEAN  
14620 SW 145 PLACE  
MIAMI FL 33186**

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

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

**12310 SW 124 Path  
miami, FL 33186**

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

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:

**Sean Kelley**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/13/03**

Date

**305-278-7573**

Daytime Phone #

CR2E034 (10/02)