2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P98000089597 DOCUMENT

1. Entity Name

BECKY AND GRANDPA'S INC.



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

04-28-2003 90992 008 ***150.00

Principal Placi 12008 RACE TI TAMPA FL 336	RACK ROAD	3	12008	Mailing Address 12006 RACE TRACK ROAD TAMPA FL 33626								
2. Principal P	lace of Busir	ess	3. Mail	3. Mailing Address								
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State	9	e.	City	City & State				4. FEI Number 59-3538517			Applied For Not Applicable	
Zip	Country			Zip Count			5. Certificate of Status Desired			Fee Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
SAIFF, REBECCA S						Name Street Address (P.O. Box Number is Not Acceptable)						
12008 RACE TRACK ROAD									*			
TAMPA FL 33626												
			City				FL Zip Code					
the obligati	ions of regist					d office or			ent, or both, in the State of Flori	DATE	miliar with, a	and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS								ADI	Election Campaign Fina Trust Fund Contribution DITIONS/CHANGES TO OFFICE		Added	May Be to Fees
	PD SAIFF, REBECCA S 12008 RACE TRACK RD. TAMPA FL 33626		D BIRECTOI	□ Delete					britanaya jarqee to arriv		Change	Addition
STREET ADDRESS	VS PHILLIP, P 19646 JEF ROEVILLE	OME APT. 139		B			Phil 1500 Dun	lip,	, Aercy County Rd 1 - L in FL. 34698	.+ 35	Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		The second se	్ జాబా⊹ బ	Delete 7	NAME STREE		چه دستور _و د د			_	□ Change	**************************************
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	☐ Delete							□ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	Addition

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 receive) 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: