2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P98000091032 **DOCUMENT #**

1. Entity Name

GREGORY CONSULTING GROUP, INC.



FILED Jan 17, 2003 8:00 am Secretary of State 01-17-2003 90091 026 ***150.00

Principal Place of Business 394 S. MAYA PALM DRIVE BOCA RATON FL 33432		Mailing Address 394 S. MAYA PALM DRIVE BOCA RATON FL 33432		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & State		City & State	······································	4. FEI Number 65-0874818 Applied For Not Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired
	6. Name and Address of Currer	nt Registered Agent		7. Name and Address of New Registered Agent
			Name	
GREGORY, DALE 394 S. MAYA PALM DRIVE BOCA RATON FL 33432			Street Addres	s (P.O. Box Number is Not Acceptable)
DUCA NA	NION FL 33432		City	Zip Code
SIGNATURE	Signature, typed or printed name of registered age.	Suggestion and title it stylicable. (NOTE	Registered Agent signature requ	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	OFFICERS AN	D DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST GREGORY, DALE M 394 S. MAYA PALM DRIVE BOCA RATON FL 33432	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS; CITY-ST-ZIP		☐ Delete	TITLE NAMESTREET ADDRESSCITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition

CITY-ST-ZIP

12. Thereby 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

SIGNATURE:

changed, or on an attachme