0501518 AV

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000095403

1. Entity Name

ECO & ART PROMOTIONS, INC.



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

04-28-2003 90473 039 ***150.00

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Principal Place of Business 350 GULF BLVD. INDIAN ROCKS BEACH FL 33785		Mailing Address 350 GULF BLVD. INDIAN ROCKS BEACH-FL 33785								
2. Principal Place of Business			3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				_	☐ CHECK HERE IF MAKING CHANGES			
City & Stat	e	City & State				4.	FEI Number 59-3543594		Applied For Not Applicable	
Zip	Country		Zip Coun		ry	5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						7.	Name and Address of New Registe	red Agent		
					Name .					
WEYLIE, WALLACE J D 350 GULF BLVD.			<u></u>			Street Address (P.O. Box Number is Not Acceptable)				
INDIAN ROCKS BEACH FL 33785										
					City			FL Zip C	ode	
	named entity submits this statement for tions of registered agent.	or the purp	pose of changing its i	registere	d office or regi	istered ag	gent, or both, in the State of Florida. I	am familiar wi	th, and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if app	olicable. (NOTE:	: Registered	Agent signature rec	quired when r	einstating) D	ATE		
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 ded to Fees	
10.				11.		ΑC	ODITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEYLIE, WALLACE J D 350 GULF BLVD. INDIAN ROCKS BEACH FL 3378	5	☐ Delete					☐ Chanç	ge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete		1			☐ Chanç	ge Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREE			,	Chang	ge Addition	

12. I hereby certify that the information supplied with this filling 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: SIGNATURE OF A RINGED OF SIGNING OFFICER OF DIRECTOR

04/25/03 727-596-9078

CR2E034 (10/02