2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000102654

1. Entity Name

SIGNATURE:

RON HARPER ENTERPRISES, INC.

Principal Place of	Business	Mailing Address					
411 HIGHWAY 41 S INVERNESS FL 3445		411 HIGHWAY 41 SOUTH INVERNESS FL 34450-4936					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, e	tc.	Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				
	S. Name and Address of Cu	rrent Registered Agent					

FILED Jan 18, 2000 8:00 am Secretary of State

01-18-2000 90149 040 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

- 	1 ,	'	•	5. C	Certificate of Status Desired	Fee Require		
6. Nai	me and Address of Current I	Registered Agent		, 7.eN	ame and Address of New Regist	ered Agent .		
			Name					
HARPER, RON 411 HIGHWAY 41 SOUTH INVERNESS FL 34450			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
INVERNEGO P	L 34430		City			FL Zip Coo	de	
8. The above named en	ntity submits this statement for	the purpose of changing its r	egistered office or regi	stered age	ent, or both, in the State of Florida.			
SIGNATURE	ped or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature rec	uired when rei	nstating)	DATE		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FI After MAY 1, 2000 F Make Check Payable to			•		10. Election Campaign Financin Trust Fund Contribution.		00 May Be d to Fees	
11.	OFFICERS AND I	DIRECTORS	12.	ADI	DITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1,5,0 VALD R. H. HWY 41 50	ARPER UTH 34450	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
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indicated on this re	port or supplemental report is:	true and accurate and that m wered to execute this report a	v signature shall have t	he same le	19.07(3)(i), Florida Statutes. I furth egal effect as if made under oath; t da Statutes; and that my name app	hat I am an office	r or director 1	