2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P98000106742 DOCUMENT

1. Entity Name

THE BRISTOL ASSOCIATES, INC.



FILED Apr 04, 2003 8:00 am Secretary of State

04-04-2003 90154 042 ***150.00

	7.027.00000.1120, 1110.				"					
Principal Place of Business 19411 NE 19TH CT N. MIAMI BEACH FL 33179		Mailing Address 19411 NE 19TH CT N. MIAMI BEACH FL 33179			1. 14.1			elikuli olike likiko		
2. Principal F	Place of Business	3. Mailing Addres	s /B		_					
Suite, Apt. #, etc.		State On Hotel			4			,		
Suite, Apt.	#, etc.	Suite, Apt. #, et	U.			☐ CHECK HERE IF M	IAKING CI	HANGES		
City & State		City & State		4. FEI Number 65-0884183			Applied For Not Applicable			
Zip Country		Zip	Zip Country		5. Certificate of Status Desired		\$8.75 Additional Fee Required			
	6. Name and Address of Current R	egistered Agent	**	a company of the second	7. N	ame and Address of New Regis		• •	<u> </u>	1
TARALITA TIFARARE A				Name SAME						
	3, THEODORE A 19TH AVE				(P.O. Box Number is Not Acceptable)					1
	BEACH FL 33179	•							1	
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	named entity submits this statement for tions of registered agent.	the purpose of chan	ging its registere	ed office or registe	ered age	nt, or both, in the State of Florida	. I am fam	iliar with, a	and accept	1
the obligat	ions of registered agent.									
SIGNATURE .	Signature, typed or printed name of registered agent and	d title if applicable.	(NOTE: Registered	d Agent signature require	ed when rein	nstating)	DATE			Ì
F	ILE NOW!!! FEE IS \$150.00								_	1
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					!	Election Campaign Financi Trust Fund Contribution.	ng 🗆		O May Be to Fees	
10.	OFFICERS AND D		11.		ADD	DITIONS/CHANGES TO OFFICER	RS AND DI	RECTORS	S iN 11	1
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NAME STREET ADDRESS										1
CITY-ST-ZIP	N MIAMI BEACH FL 33179			ST-ZIP						8
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NAME	TOPOUZIS, THEODORE		NAME							ľ
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title Name		☐ Dele	te TITLE					Change	Addition	
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12 Thereby o	certify that the information supplied with the	nie filing does not au	alify for the even	nntion stated in S	ection 1	19 07/3)(i) Florida Statutae I furti	nor cortifu	that tha in	formation	1

rhereby certify that the information supplied with this litting does not quality for the exemption stated in Section 119.07(3)(f), Florida Statutes. Finding color in 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 ther like empowered.

SIGNATURE: