

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 29, 2001 8:00 am**  
**Secretary of State**

08-29-2001 90015 030 \*\*\*150.00

0072378 AV

**DOCUMENT # P99000013967**

1. Entity Name  
**SOUBY SALES, INC.**

Principal Place of Business      Mailing Address

**4806 POINSETTIA AVE., #1**      **4806 POINSETTIA AVE., #1**  
**W. PALM BEACH FL 33407**      **W. PALM BEACH FL 33407**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

**4806 N Flagler Dr**      **4806 N Flagler Dr**

Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**#1**      **#1**

City & State      City & State

**West Palm Beach, FL**      **West Palm Beach, FL**

Zip      Country      Zip      Country  
**33407**      **Palm Beach**      **33407**      **Palm Beach**

4. FEI Number      Applied For

**65-0896865**       Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

    

6. Name and Address of Current Registered Agent

**SOUBY, LEON G JR**  
**4806 POINSETTIA AVE., #1 N Flagler Dr #1**  
**W. PALM BEACH FL 33407**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City      **FL**      Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>SOUBY, LEON G</b>
STREET ADDRESS	<b>4806 POINSETTIA AVE., #1 N Flagler Dr #1</b>
CITY-ST-ZIP	<b>W. PALM BEACH FL 33407</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>KAVANAUGH, NEIL</b>
STREET ADDRESS	<b>25 RICKS DR.</b>
CITY-ST-ZIP	<b>LAKE WORTH FL 33463</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>MADDOCK, MARGARET K</b>
STREET ADDRESS	<b>5491/2 NORTHLAKE WAY</b>
CITY-ST-ZIP	<b>PALM BEACH FL 33480</b>
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leon G. Souby Jr.*      **Leon G. Souby Jr.**      8/21/07      561-842-9111  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (5/01)

The City of West Palm Beach changed  
the street name from Poinsettia Ave  
to N. Flagler Dr.

We did not receive the first 2001  
Uniform Business Report in the  
mail

We called Tallahassee was told to  
mail a check for \$150<sup>00</sup> since we  
did not receive the first Report.

Thank you

Tr. # 99000013967

THANK YOU