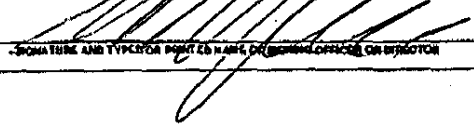


FILED
Jun 09, 2003 8:00 am
Secretary of State

06-09-2003 90122 018 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000025934			
1. Entity Name AMBER BREEZE OF FLORIDA, INC.			
Principal Place of Business 230 ROYAL PALM WAY SUITE 204 PALM BEACH, FL 33480		Mailing Address 230 ROYAL PALM WAY SUITE 204 PALM BEACH, FL 33480	
2. Principal Place of Business 44 Cocoanut Row Suite, Apt. #, etc. T-10 City & State Palm Beach, FL Zip 33480 Country USA		3. Mailing Address Stanley Balzekas Suite, Apt. #, etc. 6500 S. Pulaski Road City & State Chicago, IL Zip 60629-5136 Country USA	
4. FEI Number 65-0994413		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent EVANS, LESLIE ROBERT 214 BRAZILIAN AVE, STE 200 PALM BEACH, FL 33480		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE	
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BALZEKAS, STANLEY 230 ROYAL PALM WAY, STE 204 PALM BEACH, FL 33480 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Balzekas, Stanley 44 Cocoanut Row, Ste T-10 Palm Beach FL 33480 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true, and appropriate 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 make 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: 		6/5/03 Date	

CDE604 (10/02)



80125330
D990000252934
Amber Breeze of Florida, Inc.

44 Coconut Row, Suite T10, Palm Beach, Florida 33480
Phone: 561-832-2232 Fax: 561-832-7456

June 5, 2003

Department of State
Division of Corporate Filing
Post Office Box 6327
Tallahassee, Florida 32314

Re: Filing Fee...FEI#65-0994413

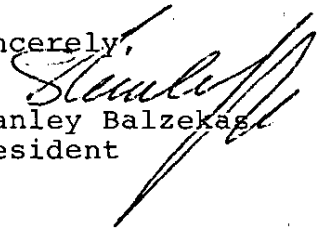
To Whom It May Concern:

We spoke to an individual in your office and were told that since we never received the original filing report for Amber Breeze of Florida, we would not have to pay the penalty fee of \$500.

Please find enclosed, a check in the amount of \$150 for the filing fee. Please note our new address on the report.

Thank you.

Sincerely,


Stanley Balzekas
President