2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P99000062694



FILED Mar 20, 2003 8:00 am Secretary of State

Zip Country Zip Country 5. Certificate of Status Desired \$8.755 Adr Fee Require 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. Name MEYER, FREDRICK S 19 BAYSHORE DR SHALIMAR FL 32579 8. The above named entity submits this statement for the purpose of changing its registered office or registored agent, or both, in the State of Florida. I am familiar with the obligations of registered agent. SIGNATURE Segnature, bood or printed name of registered agent and stie of applicable. (NOTE Registered Agent signature required when reinstating) After May 1, 2003 Fee will be \$550.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19 BAYSHORE DR SHALIMAR FL 32579 CITY-ST-ZIP TRS MEYER, FREDERICK S 19 BAYSHORE DR STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MEYER, FREDERICK S 19 BAYSHORE DR STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MEYER, FREDERICK S 19 BAYSHORE DR STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MEYER, FREDERICK S 19 BAYSHORE DR STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MEYER, FREDERICK S STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MEYER, FREDERICK S STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MEYER, FREDERICK S MEYER, FREDERICK S STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MEYER, FREDERICK S MEYER, FREDERICK S MAME STREET ADDRESS CITY-ST-ZIP Delete IIILE MAME MAME Change	03-20-2003 90121 022 ***150.00			
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Signature. Speed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE MMEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State TITLE MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 TITLE MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 Delete Delete MME MEYER, FREDERICK S 19 BAYSHORE DR SHALIMAR FL 32579 CITY-S1-2IP Delete MME Change Change	olied For			
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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 chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

