

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

04 2003 FILED

DOCUMENT # P99000066688  
 1. Entity Name  
H.K. CAVALIERE INCORPORATED

03 JUN 10 AM 8:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

100020826251  
06/13/03--01030--005 \*\*300.00

2. Principal Place of Business  
1236 KAPOK COVE CIRCLE  
 Suite, Apt. #, etc.

3. Mailing Address  
SAME  
 Suite, Apt. #, etc.

City & State  
CLEARWATER, FL

City & State  
SAME

Zip  
33759 Country  
USA

Zip  
 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number  
59-3591981 Applied For  
 Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
H.K. CAVALIERE

Street Address (P.O. Box Number is Not Acceptable)  
1236 KAPOK COVE CIRCLE

City  
CLEARWATER FL Zip Code  
33759

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 [Signature] (NOTE: Registered Agent signature required when reinstating)

DATE 5-24-03

January 1 - May 1 Fee is \$150.00  
 After May 1, Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Florida Department of State

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

| 10. OFFICERS AND DIRECTORS |                  | TITLE          | NAME                      | STREET ADDRESS                | CITY-ST-ZIP                 |
|----------------------------|------------------|----------------|---------------------------|-------------------------------|-----------------------------|
| TITLE                      | <u>PRESIDENT</u> | TITLE          | <u>HENRY K. CAVALIERE</u> | <u>1236 KAPOK COVE CIRCLE</u> | <u>CLEARWATER, FL 33759</u> |
| NAME                       |                  | NAME           |                           |                               |                             |
| STREET ADDRESS             |                  | STREET ADDRESS |                           |                               |                             |
| CITY-ST-ZIP                |                  | CITY-ST-ZIP    |                           |                               |                             |
| NAME                       |                  | NAME           |                           |                               |                             |
| STREET ADDRESS             |                  | STREET ADDRESS |                           |                               |                             |
| CITY-ST-ZIP                |                  | CITY-ST-ZIP    |                           |                               |                             |
| NAME                       |                  | NAME           |                           |                               |                             |
| STREET ADDRESS             |                  | STREET ADDRESS |                           |                               |                             |
| CITY-ST-ZIP                |                  | CITY-ST-ZIP    |                           |                               |                             |
| NAME                       |                  | NAME           |                           |                               |                             |
| STREET ADDRESS             |                  | STREET ADDRESS |                           |                               |                             |
| CITY-ST-ZIP                |                  | CITY-ST-ZIP    |                           |                               |                             |
| NAME                       |                  | NAME           |                           |                               |                             |
| STREET ADDRESS             |                  | STREET ADDRESS |                           |                               |                             |
| CITY-ST-ZIP                |                  | CITY-ST-ZIP    |                           |                               |                             |

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-24-03 727-669-5527

# Attachment#

DEAR SIRS/MADAM, P99000066688

PLEASE ACCEPT THE \$300<sup>00</sup> CHECK FOR  
LAST YEAR + THIS YEAR AND BRING ME  
UP TO DATE. MY ADDRESS CHANGED WHEN  
WE PURCHASED A HOME. PLEASE UPDATE  
YOUR RECORDS WITH MY NEW ADDRESS FOR  
ALL FUTURE CORRESPONDENCE.

THANKING YOU IN ADVANCE.



H. K. CAVALIERE INC  
1236 KARK KOVE CIR  
CLEARWATER, FL - 33759