

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000072521

FILED
Jan 08, 2002 8:00 AM
Secretary of State

Entity Name: CALVIN COLE ENTERPRISES, INC.

Current Principal Place of Business:

675 ATLANTIC BLVD
ATLANTIC BEACH, FL 32233

New Principal Place of Business:

Current Mailing Address:

675 ATLANTIC BLVD
ATLANTIC BEACH, FL 32233

New Mailing Address:

FEI Number: 59-3598745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPIER, DENISE E
675 ATLANTIC BLVD
ATLANTIC BEACH, FL 32233

Name and Address of New Registered Agent:

KOوبا, OFER
675 ATLANTIC BLVD
ATLANTIC BEACH, FL 32233

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: OFER KOوبا

01/08/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: NAPIER, DENISE E
Address: 2326 FIDDLERS LANE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VD () Delete
Name: KOوبا, OFER
Address: 1901 SEVILLA BLVD W
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: S (X) Delete
Name: KOوبا, AMY J
Address: 1901 SEVILLA BLVD W
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: T (X) Delete
Name: NAPIER, JAMES D
Address: 2326 FIDDLERS LANE
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: KOوبا, OFER
Address: 1901 SEVILLA BLVD W
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OFER KOوبا

PD

01/08/2002

Electronic Signature of Signing Officer or Director

Date