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

## P99000095171 **DOCUMENT #**

1. Entity Name



## **FILED** Apr 18, 2003 8:00 am Secretary of State

04-18-2003 90205 007 \*\*\*150.00

	COSTOM DESIGN, INC.								
Principal Place of Business 1500 W COPANS RD. #10. BLDG C 1500 W COPANS RD. #10. BLDG C POMPANO BEACH FL 33064  Mailing Address 1500 W COPANS RD. #10. BL POMPANO BEACH FL 33064					I ORDINARI NE NAMA JAMA BARA BARA TE		0)141 J1411 F		
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	lace of Business	3. Mailing Address			1 18544 654 110 15410 10111 55111 651	*** ****** *****	************	, a s , , , , , , , , , , , , , , , , ,	
Suite, Apt.	COPANS RD.	Suite, Apt. #, etc.			C OUEQUANTERS	(5.141/110.0			
# 10	blda c.				☐ CHECK HERE	IF MAKING C	HANGES		
City & Stat	e	City & State	_		4. FEI Number 65-0957264			plied For	
Bomb		 			00 0001204			t Applicable	
Zip	Country U.S.A	Zip	Country		5. Certificate of Status Desired		3.75 Add e Require		
<b>330</b> €	6. Name and Address of Current F	Registered Agent			7. Name and Address of New F			<u></u>	
<del></del>	C. Hallo and Addioso of Carrolle	togiotorou Agont	Name			<u> </u>			
NANCOO,	VIJAI		Street A	Addross (P	O. Box Number is Not Acceptable				
1500 W C	OPANS RD, #10, BLDG C		Street	Address (F.	C. BOX NUMBER IS NOT ACCEPTABLE	=) 			
	BEACH FL 33064								
			City			FL	Zip Code		
	named entity submits this statement for ions of registered agent.	the purpose of changing its r	egistered office o	r registered	d agent, or both, in the State of Flo	orida. I am farr	niliar with,	and accept	
the obligat	ions of registered agent.								Ì
SIGNATURE .					h and a second a second and a second and a second and a second and a second a second and a second a second and a second and a second a second a second a second and a second and a second a second a second a second a second and	DATE			
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signa	ture required w	nen reinstating)	DAIL			
F	ILE NOW!!! FEE IS \$150.00	j			9. Election Campaign Fir	nancina	\$5.0	<b>0</b> May Be	
					a. Liccilon Campaign in	nancing	<b>30.0</b>		
	May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State			Trust Fund Contribution			to Fees	
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12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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