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

DOCUMENT # P99000101608 HIBISCUS EXECUTIVE SECRETARIAL SERVICES,



FILED Jan 30, 2003 8:00 am Secretary of State

01-30-2003 90118 007 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4680 SWNRUE BLVD.	3. Mailing Address 4680 SWRISE BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

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City & Stat	e ERCE,	FL	City & State F1. PIERCE,		FL		Number 5 - 0962139	,	Applied For Not Applicable	
Zip 3498	2	Country U.S.A.	Zip 34982		Country 5. Certificate of Status De				8.75 Additional ee Required	
		made a marcina	an Area and research and a second	marks a s Langua si sa	7. Name and Address of Current Reg			nt Registered	Agent	
	h		White		Name F	ESSEE.	CLAUDIA			
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, IN THIS SPACE		4680 SUNRISE BLYD.								
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			t for the purpose of changing	its registere	ed office or	registered age	nt, or both, in the State of F	Florida. I am far	niliar with, and accept	
tue opiidai	tions of regist	ered agent.			;					
SIGNATURE,	: Uau	idur desse	_ CLAUDII					DATE DATE	7-03	
Jai		or printed name or registered ag	ent and title it applicable.	NOTE: Hegistere	Agent signatur	e required when rein	stating)	DATE		
	After May 1 Amended	Fee is \$550.00 UBR is \$61.25 Florida Department			:		Election Campaign F Trust Fund Contribution		\$5.00 May Be Added to Fees	
10.		2017年11月1日 1月1日 1月1日 1月1日 1月1日 1月1日 1月1日 1月1	ND DIRECTORS	/_ANT	Same and	·····································		Majorg Process Fig.	Not the second second	
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12. I hereby 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 on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

CLAUDIA HESSEE