2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S10468 **DOCUMENT#**

1. Entity Name

SIGNATURE:

SINGH REAL ESTATE ENTERPRISES, INC.



FILED Feb 27, 2003 8:00 am Secretary of State 02-27-2003 90185 013 ***158.75

Daytime Phone #

Principal Place of Business 230 NORMANDY CT PALM HARBOR FL 34683		Mailing Address 230 NORMANDY CT PALM HARBOR FL 34683				# 10010010 18% JUNIO 8811J 818JO 87JO1 1817 816V		F1841 81811 1881	
2. Principal Place of Business		3. Mailing Address			-				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			-	☐ CHECK HERE IF MAKING CHANGES			
City & State	e	City & State		4.	4. FEI Number 59-3033423		pplied For ot Applicable		
Zip	Country	Zip		Country		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent	sistered Agent			7. Name and Address of New Registered Agent			
SINGH, M	MARTHA J		Name Street Address		(P.O. E	(P.O. Box Number is Not Acceptable)			
	RBOR FL 34683					- 11 - 14 M - 1 - 14 M			
;	100/172 01000					F	L Zip Coo	de	
	named entity submits this statement ions of registered agent.	or the purpose of changing its	register	ed office or registe	ered ag	ent, or both, in the State of Florida. I ar	n familiar with,	, and accept	
Oldinatione .	Signature typed or printed name of registered ager	and title if applicable. (NOTE	: Registere	ed Agent signature require	ed when r	einstating) DATE			
, After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department					9. Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	
10.	OFFICERS AND DIRECTORS		11.		ΑĽ	DDITIONS/CHANGES TO OFFICERS AN	ND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Delete SINGH, MARTHA J. 230 NORMANDY CIRCLE PALM HARBOR FL		NAM Stri	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		NAM STRI	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition	
indicated of the cor	on this report or supplemental report	is true and accurate and that no	ny signa as requi	ture shall have the	same	119.07(3)(i), Florida Statutes. I further c legal effect as if made under oath; that ida Statutes; and that my name appears	I am an officer	r or director	