

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91881 044 ***300.00

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DOCUMENT # S11460

1. Entity Name
INTERSTATE LASER INC.



Principal Place of Business
**11540 167 PL N
JUPITER FL 33478
US**

Mailing Address
**6671 W. INDIANTOWN RD.
SUITE 56-122
JUPITER FL 33458
US**



2. Principal Place of Business

6671 W Indiantown Rd

3. Mailing Address

Suite 56-122

Suite, Apt. #, etc.

Suite 56-122

Suite, Apt. #, etc.

City & State

Jupiter FL

City & State

Jupiter FL

Zip

33458

Country

USA

Zip

33458

Country

USA

4. FEI Number

65-0232786

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BASSIK, MILES
11540 167 PLACE N.
JUPITER FL 33478**

7. Name and Address of New Registered Agent

Name
Miles Bassik
Street Address (P.O. Box Number is Not Acceptable)
6671 W Indiantown Rd
Suite 56-122
City
Jupiter **FL** Zip Code
33458

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 **Miles Bassik VP**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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 **P** ☐ Delete
NAME **MARSHALL, BASSIK ROBERTA**
STREET ADDRESS **11540 167 PL N**
CITY-ST-ZIP **JUPITER FL 33478**

TITLE **PV** ☐ Delete
NAME **BASSIK, MILES**
STREET ADDRESS **11540 167 PL N**
CITY-ST-ZIP **JUPITER FL 33478**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Miles Bassik**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/03

Date

561 575-5542

Daytime Phone #

CR2E034 (10/02)