2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S22913 DOCUMENT

. Entity Name PAULA J. DUNDON, INC.



FILED Feb 21, 2003 8:00 am Secretary of State 02-21-2003 90173 001 ***150.00

ncipal Place of Business 995 SW 240 ST DMESTEAD FL 33031		Mailing Address 15995 SW 240 ST HOMESTEAD FL 33031								
Principal Place of Business		3. Mailing Address				J 16411619 110 1100e rinin laint trans citt mint	 	.1211 51511		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FEI Number 65-0237787 Applied For Not Applicable					
Zip Country		Zip Cour		try		Certificate of Status Desired	Fee Re	5 Additi equired	onal	
	6. Name and Address of Curre	nt Registered Agent			7. 1	Name and Address of New Registere	d Agent			
				Name		•				
	Wayne M Th Kendall Drive			Street Address	(P.O. B	ox Number is Not Acceptable)				
SUITE 803 MIAMI FL 3	i3156		City			Zip	p Code			
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The above the obligation	named entity submits this statement ons of registered agent.	t for the purpose of changing it	ts register	ed office or regis	tered ag	ent, or both, in the State of Florida. I a	ani jurimai	,,,,,,		
IGNATURE _	Signature, typed or printed name of registered ag	gent and title if applicable. (NC	TE: Register	ed Agent signature requ	ired when r	einstating) DA	IE .			
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.	00 t of State				Election Campaign Financing Trust Fund Contribution.) May Be to Fees	
take Check	Payable to Florida Departmen		11.		A[DDITIONS/CHANGES TO OFFICERS	AND DIRE	CTORS	IN 11	_
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4 6 1 1 1 1	information cumplied	t with this filing does not qualify	ror the e	rempuon stated i	ა ა ასს	at a toto topin, a torica otalatos. A la la		o officer	or director	1

I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(1). 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: