2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S33061 **DOCUMENT #**

1. Entity Name

SIGNATURE:

SUNCOAST CONSULTING GROUP, INC.



FILED Mar 05, 2003 8:00 am § Secretary of State 03-05-2003 90054 015 ***150.00

	`				-	GOO WE THE					
Principal Place of Business 4954 ROTHSCHILD DR CORAL SPRINGS FL 33067 US			4954	Mailing Address 4954 ROTHSCHILD DR CORAL SPRINGS FL 33067 US							
2. Principal Place of Business			3. Mai	3. Mailing Address				·	01 01011 018 11-1		
Suite, Apt	i. #, etc.		Suite	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State			City	& State		4. FE	1 Number 65-0243791			plied For t Applicable	
Zip		Country Zip Co				ry	5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name	and Address of Curre	nt Registere	d Agent	7. Name and Address of New Registered Agent						
FLATTERY, ERIC 4954 ROTHSCHILD DR CORAL SPRINGS FL 33067						Name Street Address (P.O. Box Number is Not Acceptable)					
					-	City		- 1 0 11 - 14 - 14 - 14 - 14 - 14 - 14 -	FL	Zip Code	;
8. The above the obligation SIGNATURE	tions of regist	ered agent.						nt, or both, in the State of Florida	a. I am fam	iliar with, a	and accept
	Signature, typed	or printed name of registered age	nt and title if app	licable. (NOTE	: Registered	Agent signature require	d when reins	stating)	DATE		
Afte	r May 1, 200	I FEE IS \$150.00 03 Fee will be \$550.0 o Florida Department						Election Campaign Financ Trust Fund Contribution.	cing		May Be to Fees
10.		OFFICERS AN	D DIRECTO	RS	11.		ADD	ITIONS/CHANGES TO OFFICE	RS AND DI	RECTORS	IN 11
NAME :		ERIC HSCHILD DR RINGS FL 33067		☐ Delete		T ADDRESS ST-ZIP] Change	Addition
TITLE 'NAME STREET ADDRESS CITY-ST-ZIP		ERIC ISCHILD DR RINGS FL 33067		☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		70		☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS] Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP				□ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP) Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	-,			□ Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP				Change	Addition
of the cor	poration or th	i or supplemental report	is true and a cowered to e	eccurate and that m execute this report a	iv sianatu	re shall have the	same len	9.07(3)(i), Florida Statutes. I fur al effect as if made under oath Statutes; and that my name ap	· that I am a	an officer c	r director