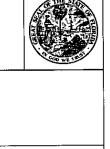
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

S43372 **DOCUMENT #**

1. Entity Name

TAYLOR INVESTMENTS, INC.



FILED Jan 08, 2003 8:00 am Secretary of State 01-08-2003 90052 049 ***150.00

Principal Place 2604 WATROUS TAMPA FL 3362 US 2. Principal Pla Suite, Apt. #	AVENUE 9 ace of Busine		2604 W TAMPA US 3. Maili Suite	3. Mailing Address Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES A FEI Number To access Applied For				
City & State			City	City & State			4. 1-	59-3072639 No			t Applicable	
Zip Country			Zip	Zip Count			5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6. Name	and Address of Cu	rrent Registere	Registered Agent Name			7. N	7. Name and Address of New Registered Agent				
SUITE 3700 TAMPA FL	KENNEDY 1) 33602-000	BOULEVARD D	nent for the purp	ose of changing its	registere	Street Addres		ox Number is Not Acceptable) ent, or both, in the State of Flor	FL	Zip Code		
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (No. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Whake Check Payable to Florida Department of State						Agent signature req	uired when re	9. Election Campaign Fina Trust Fund Contribution			0 May Be	
10.	rayable to		AND DIRECTO				AD	L DITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS	PST BURT, JAN 238 E. DA' TAMPA FL	IES, II		☐ Delete						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						☐ Change	Addition Addition	
JITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete		~				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		1			-	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						Change	Addition	

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 of 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 artificer with all other like empowered.

SIGNATURÉ:

1-06-03

Date