

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S59083

FILED
Apr 30, 2003
Secretary of State

Entity Name: INTERSTATE SUBS, INC.

Current Principal Place of Business:

7038 OKEECHOBEE ROAD
FT. PIERCE, FL 34945

New Principal Place of Business:

Current Mailing Address:

7038 OKEECHOBEE ROAD
FT. PIERCE, FL 34945

New Mailing Address:

1460 ARTIMINO LANE
BOYNTON BEACH, FL 33436

FEI Number: 65-0295671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, MARIE
7038 OKEECHOBEE RD
FORT PIERCE, FL 34945 US

Name and Address of New Registered Agent:

LONG, MARIE
1460 ARTIMINO LANE
BOYNTON BEACH, FL 33436 US

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.

SIGNATURE: MARIE LONG

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LONG, MARIE
Address: 7038 OKEECHOBEE RD
City-St-Zip: FORT PIERCE, FL 34945

Title: D () Delete
Name: LONG, MARIE
Address: 7038 OKEECHOBEE RD
City-St-Zip: FORT PIERCE, FL 349458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIE LONG

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date