2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S78998 DOCUMENT

1. Entity Name

VENTURE RESOURCES, INC.



FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90218 013 ***150.00

Daytime Phone #

	•										
Principal Place of Business 875 E CAMINO REAL 11F BOCA RATON FL 33432			875 116	Mailing Address 875 E CAMINO REAL 11F BOCA RATON FL 33432							
US 2. Principal Place of Business				3. Mailing Address				<u> </u>		albii dibii bi	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State				City & State			4.	FEI Number 65-0301667	<u> </u>	_ 	plied For t Applicable
Zip	C	ountry	Z	ip	Coun	try	5.	Certificate of Status Desired		8.75 Add	litional
	6. Name and	Address of	Current Regist	ered Agent			7.	Name and Address of New R	egistered Aç	ent	
	. "					Name		ı			
BURTON E						Street Add	iress (P.O. E	Box Number is Not Acceptable)		<u> </u>
	MINO REAL #1	11-							-		
BUCA HAI	ron FL 33432					City		<u>, , , , , , , , , , , , , , , , , , , </u>	FL	Zip Code	e
8. The above	named entity-su	bmits this sta	tement for the p	urpose of changing its	register	ed office or re	egistered ag	gent, or both, in the State of Flo	rida. I am fa	miliar with,	and accept
the obligati	ions of registered	d agent.	8	<i>a</i>				7	Ass.	/2	
SIGNATURE	1 h	ur	برجب ک	ne_					DATE	٠,	
			stered agent and title if	applicable. (NOT	E: Hegistere	ed Agent signature	required when	Terristating)			·
After	ILE NOW!!! F May 1, 2003 I Pavable to Fi	Fee will be		,				Election Campaign Fir Trust Fund Contribution			0 May Be I to Fees
10.	-		ERS AND DIREC		11.		Al	DDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR:	S IN 11
TITLE	PMD			☐ Delete	TITL	.E				☐ Change	☐ Addition
NAME	BURTON, EN		14E		NAN eth	ME EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	875 E CAMIN BOCA RATON					Y-ST-ZIP					
TITLE	TD			☐ Delete	TITL	E	-			☐ Change	☐ Addition
NAME	ENGEL, MAR				NAN	· - [
STREET ADDRESS	145 4TH AVE NEW YORK N		ريد المستحدث			EET ADDRESS	<u> </u>			·	
TITLE	SD TORK	11 10000		☐ Delete	TITL		 -			☐ Change	Addition
NAME	ENGEL, SUS	AN			NAM	1		•			
STREET ADDRESS	3E 71ST STR	EET				EET ADDRESS					
CITY-ST-ZIP	NEW YORK N	IY 10021	1.41-11		_	Y-ST-ZIP		<u></u>		Change	Addition
TITLE NAME				☐ Delete	TITE NAM	I .					-
STREET ADDRESS						REET ADDRESS					
CITY-ST-ZIP						Y-ST-ZIP				<u>гл сь</u>	[T] Addis-
TITLE				☐ Delete	TITI	·				Change	Addition
NAME Street address						REET ADDRESS					
CITY-ST-ZIP				·	CIT	Y-ST-ZIP					
TITLE				☐ Delete						☐ Change	☐ Addition
NAME						1					
STREET ADDRESS CITY-ST-ZIP			<u>.</u>		CIT	Y-ST-ZIP				16 . Al	
12. I hereby of indicated of the collaboration changed	certify that the in I on this report o rporation or the r , or on an attach	formation sup r supplement eceiver or trument with an	pplied with this fi al report is true a stee empowered address, with al	ling does not qualify for and accurate and that d to execute this repor I other like empowered	or the ex- my signa t as requ t,	emption state ature shall ha uired by Chap	ed in Section ve the same oter 607, Flo	e legal ellect as il made under	oain, maci a	Dian onice	- Dia - 11 if
		(Kar)	TATIRE	EDEAL	g F r)		1/1//2	161 -	J //	
SIGNA1	TURE:	/2000	المترس المستح	Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP With this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ort 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if sess, with all other like empowered.							