2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V05323 1. Entity Name AHRENS ENTERPRISES, INC.					03 MAY -8 AM 9: 12			
Principal Plac	ce of Business	Malling Address		2	SECRETARY OF S TALLAHASSEE, FLO)RIDA .		
1461 KINET! LAKE PARK, I		1461 KINETIC ROAD STE 2 LAKE PARK, FL 33403	us	5 /2	700020289 05/30/03—01056—01	9037 0*** 0	.00	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			2003×#AM	EN	ED	
City & State		City & State		-	4. FEI Number 65-0297589	<u> </u>	pplied For of Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired \(\square\)	\$8.75 Ad Fee Require		
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered	Agent		
AHRENS, BARBARA 1461 KINETIC ROAD LAKE PARK, FL 33403				Name Street Address (P.O. Box Number is Not Acceptable)				
			City		F	Zip Cod	ie .	
8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE								
FILE NOWIH FEE IS \$150.00 After May 1, 2003 Fee will be \$560.00 Make Check Payable to Florida Department of State					9. Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	IS IN 11	
TITLE	D RADBARA	☐ Delete	TITLE	PRES	sident, Seety TREAS.	Change	Addition	
NAME STREET ADDRESS	AHRENS, BARBARA 1461 KINETIC ROAD		NAME STREET ADDRES	SIHA	LENS, BARBARA I KINETIC ROAD			
CITY-ST-ZP	\$ <u>.</u>		COY-ST-ZIP		Ce Park, FL 33403		_	
TITLE	D	☐ Delete	TITLE	Vie	e President	Change	☐ Addition	
NAME STREET ADDRESS	AHRENS, RICHARD		NAME STREET ADDRES	19-11/A	ZENS, RICHARD I KINETIC ROAD		1	
CITY-ST-2P	LAKE PARK, FL 33403		CITY-ST-ZIP	Lak	* PARK, FL 33403			
TITLE		☐ Delete	TITLE	Vic	e PRESIDENT	[] Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRES	DOM	N B. Boit Nott Kinetic Road		İ	
CITY-ST-ZIP	1		CITY-ST-ZIP	LA	Ke PANK FL 33403	3		
TITLE		☐ Delete	TITE		,	☐ Change	Addition	
NAME CIPCES ADDRESS			NAME CONCER ADDORG	. }	700020289 05/30/0301056011	DBT)	
STREET ADDRESS CITY-ST-2P			STREET ADDRES City-St-21P	`	05/30/0301056011	**8.7	'5	
TITLE		☐ Delete	TOLE	<u> </u>		☐ Change	☐ Addition	
NAME			NAME				Į	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES City-St-Zip	·			Í	
TITLE	 	☐ Delete	1TLE	 		☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRES				ļ	
CITY-ST-2P	İ		CITY-ST-ZIP	, l			1	

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 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:

SIGNATURE AND TYPED OR PRINTED HANGE OF SIGNING OFFICER OR DIRECTOR

NhRens

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