


FILED
Mar 10, 2003 8:00 am
Secretary of State

02-25-2003 90116 004 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P02000069830
 1. Entity Name
FLORIDA CODERS INC.



DO NOT WRITE IN THIS SPACE

55014935

2. Principal Place of Business 1901 Harrison Street Suite, Apt. #, etc. 2nd Floor		3. Mailing Address 1901 Harrison Street Suite, Apt. #, etc. 2nd Floor	
City & State Hollywood, Florida		City & State Hollywood, Florida	
Zip 33020	Country US	Zip 33020	Country US

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4. FEI Number
542062725

Applied For	<input type="checkbox"/>
Not Applicable	<input checked="" type="checkbox"/>

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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.

7. Name and Address of Current Registered Agent

Name **Boris Sitel**

Street Address (P.O. Box Number is Not Acceptable)
1901 Harrison Street, 2nd Floor

City **Hollywood** FL Zip Code **33020**

SIGNATURE  **Boris Sitel** DATE **02/19/03**

Signature, typed or printed name of registered agent and fee 1 applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
Make Check Payable to Florida Department of State


9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Boris Sitel 1901 Harrison Street, 2nd Floor Hollywood, Florida 33020	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **Boris Sitel** DATE **02/19/03** (954) 927-2557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #