## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Principal Place of Business 5 THOMAS MELLON CIR

SAN FRANCISCO CA 94134

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

2. Principal Place of Business

SACHER, CHARLES P ATTY

2655 LEJEUNE RD SUITE 1101 **CORAL GABLES FL 33134** 

the obligations of registered agent.

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00

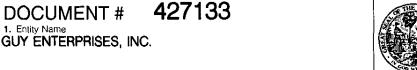
After May 1, 2003 Fee will be \$550.00

of the corporation or the receiver or trustee empoy changed, or on an attachment with an adjress w

SIGNATURE:

STE 220

US



Mailing Address
5 THOMAS MELLON CIR

SAN FRANCISCO CA 94134

3. Mailing Address

City & State

JRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8. The above named entity submits this statement for the purpose of changing its registered office or registered

Suite, Apt. #, etc.

STE 220



7

Street Address (P.O.

(NOTE: Registered Agent signature required when reinstating)

Country

## **FILED** May 08, 2003 8:00 am Secretary of State

05-08-2003 90163 015 \*\*\*150.00

☐ CHECK HERE IF MAKING CHANGES							
4. FEI Number 59-1464511	Applied For Not Applicable						
Certificate of Status Desired S8.75 Additional Fee Required							
7. Name and Address of New Registered Agent							
<u> </u>	<u>-</u>						
O. Box Number is Not Acceptable)							
······································	,						
FL Zi	p Code						
dagent, or both, in the State of Florida. I am familia	r with, and accept						
**							

\$5.00 May Be

9. Election Campaign Financing

Make Check	Repartment of State			must Fund Contribution.	□ Added	to rees		
10.	OFFICERS AND DIRECTOR	ORS 11. A		ADDITIONS/CHANGES TO OFFICERS A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
	PT RODRICK, GUY 25 BOROUGHWOOD PLACE HILLSBOROUGH CA	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRICK, MARISTELLA 25 BOROUGHWOOD PLACE HILLSBOROUGH CA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RODRICK, SCOTT 57-OAK-VALLEY ROAD	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
TITLE NAME . STREET ADDRESS CITY-ST-ZIP		C) Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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 employed to effect as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if								