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

DOCUMENT # F 98000017/1 FACES UNLIMITED CORPORATION

FILED Apr 09, 2003 8:00 am Secretary of State

04-09-2003 90197 001 ***150.00

	4 4
Build President Comment of the Comme	
我就把我们都是我看得你的,我们就是你的,我不知识,我不知识,你不知识,你是我的人,我们就是我的人,我们就是我的人,我们就是我们的人,我们就不会一个一个人,不是一	
的复数形式的 最高的基本的 "我们就是我们的,我们的时候,我们的时候,我们就是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	
DO NOT WRITE IN THIS SPACE	

2. Principal Place of Business 7029 3. Mailing 7029	FAIRFIELD DRIVE	
	pt. #, etc.	DO NOT WRITE IN THIS SPACE
PENSACOLA, FLORIDA PENSA	tate AA, FLORIDA	4. FEI Number Applied For 88 0 38 6 5 3 5 Not Applicable
F	506 ESCAMA	SR 75 Additional
		7. Name and Address of Current Registered Agent
	Name	MIGUEL SARIA
DO NOT WRITE	Street	
1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1. 18 1.		Address (P.O. Box Number is Net Acceptable) 4225 SILVER OAK DRIVE
IN THIS SPACE		
agener ner energie der gerande geleiche Bergeleite. Die Bergeleiche Bergeleite Bergeleite Bergeleite der State der Geschliche Bergeleite Geschliche Bergeleite Ber	City	milton FL 39570
8. The chara garded entity submits this statement for the purpose	of changing its registered office	or registered agent, or both, in the State of Fiorida. I am familiar with, and accept
the obligations of registered agent.	or changing its registered balice	or registered agent, or both, in the state of Florida. Familianial with, and accept
00:00		4-7-03
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	e (NOTF: Registered Agent sig	nature required when reinstating) DATE
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00	(VO.11.1.1.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	9. Election Campaign Financing \$5.00 May Be
Amended UBR is \$61.25		Trust Fund Contribution. Added to Fees
Make Check Payable to Florida Department of State	included the construction of the Construction	
10. 2 OFFICERS AND DIRECTORS		Transference and the second
NAME SHARBRA HIGGINS	TITLE NAME	
emera upporce 7009 III. FAIRFIELD PRICE	CIDEET ADDRESS	
CITY TO PENSACOLA, FLORIDA 32500	CITY-ST-23P	
HILE CVCD	TITLE	
NAME SHARBRA HIGGINS	NAME	
STREET ADDRESS 7029 W. FAIRFIELD DRWE CITY-ST-ZIP PENSACOLA, FLORIDA 32500	STREET ADDRESS CITY-ST-ZIP	
	THE PROPERTY OF THE PROPERTY O	
TITLE .	TITLE NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP		
TITLE	TITLE	IN THIS SPACE
NAME	NAME	
STREET ADDRESS	-STREET ADDRESS	
CITY-SI-ZIP	CITY-ST-ZIP	
TITLE	TITLE	
NAME STREET ADDRESS	STREET ADDRESS	and the state of t
CITY-ST-ZIP	CITY ST. ZIP	
TITLE	TILE	
NAME .	NAME	The state of the s
STREET ADDRESS	STREET ADDRESS	Harris Committee

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP