2003

## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

| UNIFORM BUSINESS REPORT (UBR)   |  |  |                                    |                           |   |                  | FILED  |  |  |
|---|--|--|------------------------------------|---------------------------|---|------------------|--|--|--|
| DOCUMENT # P00000031289 1. Entity Name  |  |  |                                    |                           |   |                  | 00 DEC -5P   | H 12: 00   |  |
| DRS MANAGEMENT SERVICES CORP.   |  |  |                                    |                           |   |                  | SECRÉTARY E<br>TALLAHASSEE                             | FLORIDA -  |  |
|   | 00 NO  | OT WRIT  | TE IN TH                           | IIS SPA                   | ĊE  |                  | HALLING  |  |  |
| 2. Principal Place of Business 11210 NW 61ST ST 1210 NW 61ST ST   |  |  |                                    |                           | 1 1 1 1   |                  |  |  |  |
| Suite, Apt. #, etc.   |  |  |                                    | Suite. Apt. #, etc.       |   |                  | INSTATION OF WHITE                                     | IN THIS SPACE 03   |  |
| City & State MIAMI, FL.   |  |  | MIAMI, F                           | City & State<br>MIAMI, FL |   |                  | . FEI Number 65-0999938                                | Applied For Not Applicable   |  |
| Zip<br>33178  |  | Country  | 33178                              |                           | SA  |                  | . Certificate of Status Desired                        | \$8.75 Additional Fee Required   |  |
| PARE THE AR   | 対象が強性  | Bed Reigne   |                                    |                           | \$  |                  | Name and Address of Current Re                         | egistered Agent  |  |
|   |  |  |                                    |                           | Name ZOMERFELD, RAYMOND J   |                  |  |  |  |
|   | <b>经过程的外的运</b> 线   | O NOT  | 生物性疾病。 空间失意知 性。                    |                           | Street Ac   | ldress (P.C      | . Box Number is Not Acceptable)                        |  |  |
|   | is all   | ITHIS S  | PACE                               |                           | Will  |                  | DE LEON BLVD., #1045                                   |  |  |
|   |  |  |                                    |                           | City CC   | RAL G            | ABLES  | FL Zin Code<br>33134   |  |
|   | named entity<br>ions of register                           |  | ent for the purpose o              | of changing its regi      | istered office or   | registered       | agent, or both, in the State of Floric                 | da. I am familiar with, and accept   |  |
|   | /  |  | •                                  |                           |   |                  |  |  |  |
|   |  | - 1  |                                    | 110                       | X   | ×~               | m/self APR   | 0 9 2003   |  |
| SIGNATURE _   | Signature, typed or  | ryatinea narrayol registered   | agent and little if not his abid   | Next Hou                  | pisterus prent signatur   | ru required whi  |  | 0 9 2003   |  |
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12. Thereby certify that the information supplied with this filling 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 reporting 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Y

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

**0 9** 2003

(305) 444-8282

Davine Proce a





October 15, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re:

DRS Management Services Corp.

EIN# 65-0999938

Document# P00000031289

The above named taxpayer received an application for reinstatement. The taxpayer sent in the payment in the amount of \$150.00 along with the 2003 Uniform Business Report on April 9, 2003. The check never cleared. Apparently, your department lost both the form and check.

Enclosed please find a copy of the signed 2003 Uniform Business Report sent in by the taxpayer along with a newly reissued check for \$150.00.

If you have any questions please do not hesitate to contact us.

Sincerely,

OCARIZ, GITLIN & ZOMERFELD, LLP

Raymond J. Zomerfeld, C.P.A.

For the firm

999 Ponce de Leon Blvd. Suite 1045 Coral Gables, FL 33134

Tel 305.444.8288 Fax 305.444.8280

5415 Mariner Street Suite 215 — Tampa, FL 33609

Tel 813.636.0609 Fax 813.636.9223

www.ogz-cpa.com

Members of:

American Institute of Certified Public Accountants

Florida Institute of Certified Public Accountants

National Association of Certified Valuation Analysts RJZ/an

Encl.

PLEASE ACKNOWLEDGE RECEIPT OF THIS LETTER BY RETURNING A COPY IN THE ENCLOSED SELF-ADDRESSED ENVELOPE.