

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P000000 64761
 1. Entity Name
 CYBER DIFFERENCE CORP.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 380 BAYSHORE Blvd.
 Suite, Apt. #, etc.
 # 102

3. Mailing Address
 380 BAYSHORE Blvd.
 Suite, Apt. #, etc.
 # 102

DO NOT WRITE IN THIS SPACE

City & State
 CLEARWATER . FL .

City & State
 CLEARWATER . FL .

Zip
 33759

Country
 U.S.A.

Zip
 33759

Country
 U.S.A.

4. FEI Number
 58-2550556

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
 TOM DEGROOT

Street Address (P.O. Box Number is Not Acceptable)
 380 BAYSHORE Blvd.

City
 CLEARWATER

State
 FL

Zip Code
 33759

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 TOM DEGROOT *[Signature]* DATE 7.29.03

Signature, typed or printed name of registered agent and date if 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 \$61.25
 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 P + V + T + C + M MATHIAS LEVAREK 130 W. GUNSMOKE DR. SEDONA, AZ, 86336	TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]
TITLE NAME STREET ADDRESS CITY - ST - ZIP D DAVID STEWART 390 VAN DEREN ST. SEDONA, AZ, 86336	TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]
TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]	TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]
TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]	TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]
TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]	TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]
TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]	TITLE NAME STREET ADDRESS CITY - ST - ZIP [REDACTED]

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: [Signature] DATE 7.29.03

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

CR2E034B (12/02)

Amalmut
80134941
CyberDifference Corp.
(928) 203-0835

July 29, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**Re: ~~CyberDifference Corp.~~
Doc. # P0000064761**

To Whom It May Concern:

Although I reported the change of address for my Resident Agent back in January (via registered mail), I never received the Uniform Business Report for 2003.

I spoke with a gentleman in your office today, who advised me to request a waiver of the late penalty charge based on not receiving the UBR.

I have downloaded and completed the UBR form for 2003, which is enclosed herewith, together with the filing fee of \$150.00.

Thank you for expediting this request and rapidly reinstating CyberDifference Corp.'s certificate.

Regards,


Mathias Pierre Levarek, Ph.D.

Enclosures
MPL/crg