

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

DOCUMENT # *P01000086648*

1. Entity Name

Zerochaos, INC f/k/a Zerachacs II, Inc

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42203
 DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

*111 W Jefferson St
 Suite 100*

3. Mailing Address

*111 W Jefferson St
 Suite 100*

City & State

Orlando FL

City & State

Orlando FL

4. FEI Number

59-3742199

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

*W. GRAHAM WHITE
 P.O. BOX 830 32790-0880
 250 PARK AVE. SOUTH, 5TH FLOOR
 WINTER PARK FL 32789*

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 IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when renewing)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

January 1 Fee: \$150.00
 After May 1 Fee: \$550.00
 Amended UBR: \$61.25
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<i>CEO/President</i>
NAME	<i>Dayne Williams</i>
STREET ADDRESS	<i>111 W. Jefferson St. Suite 100</i>
CITY-ST-ZIP	<i>Orlando FL 32801</i>
TITLE	<i>Vice President</i>
NAME	<i>Druce Gain</i>
STREET ADDRESS	<i>(SAME)</i>
CITY-ST-ZIP	<i>(SAME)</i>
TITLE	<i>Vice President</i>
NAME	<i>Bon Nemik</i>
STREET ADDRESS	<i>(SAME)</i>
CITY-ST-ZIP	<i>(SAME)</i>
TITLE	<i>Secretary</i>
NAME	<i>W. Niamon Robinson Jr</i>
STREET ADDRESS	<i>(SAME)</i>
CITY-ST-ZIP	<i>(SAME)</i>
TITLE	<i>Treasurer</i>
NAME	<i>Mark Lowrey</i>
STREET ADDRESS	<i>(SAME)</i>
CITY-ST-ZIP	<i>(SAME)</i>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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 IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address/with all other like empowered.

SIGNATURE:

William H. Robinson Jr. 5/6/02 (407) 447-3315

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone

CR2E034B (12/01)

Attachment

42203

p01000086648



VIA USPS MAIL

August 21, 2002

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

RE: Uniform Business Report for ZeroChaos, Inc. f/k/a ZeroChaos II, Inc.

Dear Sir or Madam:

Please find enclosed the corrected Uniform Business Report. I received your letter dated June 17, 2002, on or about August 20, 2002.

Please be advised that we inadvertently filled in Section 7 of the Uniform Business Report indicating a change of Registered Agent when, in fact, our Registered Agent still continues to be W. Graham White as indicated on the corrected Uniform Business Report attached hereto.

If you require any further assistance in this matter, please do not hesitate to contact me.

Sincerely,

David Fernandez
Assistant to General Counsel

THIS IS A COPY OF A DOCUMENT THAT IS NOT A COPY OF A COPY

Please find enclosed the corrected Uniform Business Report. I received your letter dated June 17, 2002, on or about August 20, 2002.