

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 15, 2000 8:00 am**
Secretary of State

03-15-2000 90139 042 ***150.00

DOCUMENT # P95000029751

1. Entity Name

ED'S CREATIVE FORM & STEEL, INC.**C0038003**

DO NOT WRITE IN THIS SPACE

Principal Place of Business 3620 MISTY OAK DRIVE #1516 MELBOURNE FL 32901 US		Mailing Address 3620 MISTY OAK DRIVE #1516 MELBOURNE FL 32901-8717 US	
2. Principal Place of Business 3605 Misty Oak Drive Suite, Apt. #, etc. # 504 City & State Melbourne, Florida Zip 32901 Country USA		3. Mailing Address 3605 Misty Oak Drive Suite, Apt. #, etc. # 504 City & State Melbourne, Florida Zip 32901 Country USA	
4. FEI Number 59-3429102		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent YANKO, EDWARD B 3620 MISTY OAK LANE #1516 MELBOURNE FL 32901		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 3605 Misty Oak Dr. #504 City Melbourne FL Zip Code 32901	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME YANKO, EDWARD B STREET ADDRESS 3620 MISTY OAK DRIVE #1516 CITY-ST-ZIP MELBOURNE FL 32901	<input type="checkbox"/> Delete	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME 3605 Misty Oak Drive #504 STREET ADDRESS Melbourne FL 32901 CITY-ST-ZIP	
TITLE STD NAME YANKO, MELISSA STREET ADDRESS 3620 MISTY OAK DRIVE #1516 CITY-ST-ZIP MELBOURNE FL 32901	<input type="checkbox"/> Delete	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME 3605 Misty Oak Drive #504 STREET ADDRESS Melbourne, FL 32901 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Melissa Yanko Melissa Yanko 3/6/00 (321) 953-8302
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #