

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90054 027 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000038538
1. Entity Name
 STEVE LADRIG, INC.

Principal Place of Business
 2325 MOOREHAVEN DRIVE W
 CLEARWATER, FL 33763
Mailing Address
 2325 MOOREHAVEN DRIVE W
 CLEARWATER, FL 33763

2. Principal Place of Business
 1201 SPAULDING RD.
 Suite, Apt. #, etc.
3. Mailing Address
 P.O. BOX 233
 Suite, Apt. #, etc.

City & State
 DUNEDIN, FL
 Zip 34698 Country
City & State
 DUNEDIN, FL 34697
 Zip 34697 Country

4. FEI Number
 59-3514719
Applied For
 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 LADRIG, STEVE
 2325 MOOREHAVEN DR. W.
 CLEARWATER, FL 33763

7. Name and Address of New Registered Agent
 Name
 LADRIG, STEVE
 Street Address (P.O. Box Number is Not Acceptable)
 1201 SPAULDING ROAD
 City
 DUNEDIN FL Zip Code 34698

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 STEVE LADRIG
 Signature, typed or printed name of registered agent and title if applicable. (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. (See criteria on back)
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing \$5.00
 Trust Fund Contribution. May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	LADRIG, STEVE 2325 MOOREHAVEN DRIVE W CLEARWATER, FL 33763	TITLE P	LADRIG, STEVE 1201 SPAULDING ROAD DUNEDIN, FL 34698
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

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: *Steve Ladrig* STEVE LADRIG, PRESIDENT 4/30/02
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (9/99)