

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90003 035 ***150.00

DOCUMENT # P99000009452

1. Entity Name
NEXTEEN MAGAZINE, INC.

R

Principal Place of Business
 214 W. 64TH ST.
 HOLMES BEACH FL 34217

Mailing Address
 214 W. 64TH ST.
 HOLMES BEACH FL 34217

2. Principal Place of Business
5506 Holmes Blvd.

3. Mailing Address
PO Box 1395

City & State
Holmes Beach, FL

City & State
Holmes Beach, FL

Zip
34217 Country
USA

Zip
34218 Country
USA

4. FEI Number
65-090-3582

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
BURNES, DOUG
 214 W. 64TH ST.
 HOLMES BEACH FL 34217

7. Name and Address of New Registered Agent
 Name
DOUG BURNES
 Street Address (P.O. Box Number is Not Acceptable)
5506 HOLMES BLVD.
 City
Holmes Beach **FL** Zip Code
34217

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 *DOUG BURNES, President* DATE *7/7/00*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP | P BURNES, DOUG 214 W. 64TH ST. HOLMES BEACH FL 34217 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST ROZSA, KATLIN 214 W. 64TH ST. HOLMES BEACH FL 34217 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>5506 HOLMES BLVD</i> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>5506 HOLMES BLVD</i> |
| 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"/> Change <input type="checkbox"/> Addition |
| 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"/> 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: *DOUG BURNES* DATE *7/7/00* Daytime Phone # *941-778-8470*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment
D# P9900009452
D0069874

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

6 August, 2000

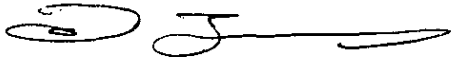
To whom it may concern:

Nexteen Inc. is a first year company, having been incorporated in 1999. We were unaware of the existence of the Division of Corporations, and thus knew nothing of the Uniform Business Report and the filing fee.

In a telephone conversation with Stacey from your reimbursement department, she suggested I write and explain that, not only was I ignorant of the need for this annual report, but that I did not receive the initial form sent out by your office.

Please find enclosed the 2000 Uniform Business Report and a check for the annual filing fee of \$150.00

Sincerely,



Doug Burness
President