## 2002 UNIFORM BUSINESS REPORT (UBR)

P99000091617

**DOCUMENT #** 

PHATLINKS.COM, INC.

1. Entity Name

## FILED Aug 11, 2002 8:00 am Secretary of State

07-23-2002 90333 025 \*\*\*150.00

Principal Place of Business Mailing Address 41225 620 EUCLID AVE 620 EUCLID AVE SUITE 204 SUITE 204 LEXINGTON KY 40502 LEXINGTON KY 40502 2. Principal Place of Business (03/61/19ermill Lane 3. Mailing Address
631 Gingermill Lare Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For - exington Kentucky exinston. Ky 40509 58-2500789 Not Applicable Country FAYETTE Zip 40509 \$8.75 Additional 5. Certificate of Status Desired FAY'S TTE 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Alfred A. Colby-MARTIN, JOHN P Street Address (P.O. Box Number is Not Acceptable) 401 S LINCOLN AVE 625 East Twiggs St., Suite **CLEARWATER FL 33756 FC** 33802 -Tampa, Flôrida 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. 8/7/02 Alfred A. Colby SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition 10/6 TITLE Delete TITLE FLEMM, WILLIAM S NAME NAME 631 GINGERMILL LANE STREET ADDRESS STREET ADDRESS **LEXINGTON KY 40509** CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITI F ☐ Change noithba 🗆 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP ☐ Change Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP

13. Thereby 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 eath, 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.

TITLE NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Delete

SIGNATURE: /

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

5-5-02

839-543-0443

☐ Change

☐ Change ☐ Addition

Addition

Alfred A. Colby, P.A.

41225

Technology and Business Law

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August 8, 2002 Comment of the commen

Division of Corporations Florida Department of State Post Office Box 1500 Tallahassee, Florida 32302-1500

Re:

Phatlinks.com. Inc. 199000091617

To Whom It May Concern:

We have corrected the registered agent information.

If you have any questions, please contact me.

Sincerely,

Stacey & Catherwood
Stacey S. Catherwood

Assistant to Alfred A. Colby\_\_\_\_

**Enclosures**