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

FILED May 28, 2002 8:00 am Secretary of State

DOCUMENT # 565588 1. Entity Name METAL DEXTERITY COMPANY, INC.			05-28-2002 91753	043 ***158.75
DO NOT WRITE		ACE		
2.624 SOUTH F STREET	3. Mailing Address 624 SOUTH F S	STREET		
Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State LAKE WORTH FL	City & State, LAKE WORTH FL		4. FEI Number 59-1815498	Applied For Not Applicable
Zip Country USA	^{Zip} 33460	Country USA	E Cortificato of Status Dosirod 77 \$6	8.75 Additional
		7	. Name and Address of Current Registered A	gent
TO NOT WOITE			LISSA DOYLE	
		Street Address)1. Box Number is Not Acceptable)	
IN THIS SP	ACE		•	
		City LAK	E WORTH FL	Zio Code 33461
8. The above named entity submits this statement for	the purpose of changing its re		· · · · · · · · · · · · · · · · · · ·	
SIGNATURE Signature, typed or printed name of registered agent a	nd ikle if applicable. (NOTE; R	Registered Agent signature required v	when reinstating) , DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 - May 1. After May 1. Fee Amended UBR Make Check Payable to		Fee is \$550.00 UBR is \$61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11. OFFICERS AND I	DIRECTORS			
NAME PD NAME DEBATTY, W. MARION		TITLE NAME		12/0
STREET ADDRESS 624 SOUTH F STREET LAKE WORTH FL 3346	n	STREET ADDRESS CITY-ST-ZIP		CRZE034B (12/01)
TITLE S	· · · · · · · · · · · · · · · · · · ·	TITLE		7826
NAME DOYLE, MELISSA C STREET ADDRESS 1101 LEHTO LANEZUC	4	NAME STREET ADDRESS CITY-ST-ZIP		
TITLE LAKE WORTH FL 3346	1	inti		
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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 on an attachment with an address, with all other like empowered.				
SIGNATURE. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Day Lime Phone &				