## 2002 UNIFORM BUSINESS REPORT (UBR)

F00000007021

DOCUMENT # 1. Entity Name

HANDEX OF OHIO, INC.	,	V	
Principal Place of Business 4722-M INTERSTATE DRIVE CINCINNATI OH 45246-1145	Mailing Address 30941 SUNEAGLE DR MOUNT DORA FL 32757		
2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		



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Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State	<del>:</del>	City & State		4. FEI Number 3	I-1374576	Applied For Not Applicable	
Zip	Country	Zip	Country			\$8.75 Additional Fee Required	
6. Nar	me and Address of Current	Registered Agent		7. Name and Addre	ss of New Registered	Agent	
NRAI SERVICES, INC. 526 E. PARK AVE.		Name Street Addr	Name Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL			City			Zip Code	
the obligations of reg	ntity submits this statement for istered agent.		'		E State of Florida. I am	<b>-</b>	
	ligible to satisfy its Intangible at and elects to do so.	After Septemb	OW!!! FEE IS \$550.00 er 13, 2002 Fee will be \$ Payable to Department of	7 3 0.00   T T	ampaign Financing I Contribution.	\$5.00 May Be Added to Fees	
11.	OFFICERS AND	DIRECTORS	12.	ADDITIONS/CHANG	DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
I OD							

TITLE Delete ☐ Change Addition EATMAN, ROGER NAME 30941 SUNEAGLE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MT. DORA FL 32757-9784 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BANNON, GEORGE NAME STREET ADDRESS 30941 SUNEAGLE DRIVE STREET ADDRESS CiTY-ST-7IP MT. DORA FL 32757-9784 CITY-ST-ZIP TITLE VAS ☐ Delete TITLE ☐ Change Addition NAME RICHARDS, BRIAN NAME STREET ADDRESS 30941 SUNEAGLE DRIVE STREET ADDRESS CITY-ST-7IP MT. DORA FL 32757-9784 CITY-ST-ZIP TITLE S ☐ Delete TITLE ☐ Change ☐ Addition TABOR, WILLIAM E JR. NAME STREET ADDRESS 30941 SUNEAGLE DRIVE STREET ADDRESS CITY-ST-ZIP MT. DORA FL 32757-9784 CITY-ST-ZIP ☐ Delete [ ] Change Addition MULLINS, WILLIAM P STREET ADDRESS 30941 SUNEAGLE DRIVE STREET ADDRESS CITY-ST-ZIP MT. DORA FL 32757-9784 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition ALEXANDER, MIKE NAME NAME STREET ADDRESS 30941 SUNEAGLE DRIVE STREET ADDRESS CITY-ST-ZIP MT. DORA FL 32757-9784

13. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MILLIAMDE. TABOR, JR. SECRETARY 7-2-02



Attachment Document# F00000007021 12214)

July 3, 2002

Florida Dept. of State Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, Fl 32302-1500

RE: Handex of Ohio, Inc.

To Whom It May Concern:

I have enclosed the UBR for Handex of Ohio, Inc and a check for \$150 (one hundred and fifty dollars). I phoned the Dept of State, Corporations Division and was informed that if I a wrote a letter of explanation for the delinquency of the report, the late fee would be waived.

We have several different entities that are registered in Florida, and while some of our entities UBR's were processed online, they were not all processed online as they should have been. Therefore, I was under the impression that all reports were completed timely through the online method.

I would appreciate a waiver of the late fee and apologize for the inconvenience. Please accept this report and check as submittal of our Uniform Business Report.

If you have any questions or comments, please call me at 352.735.1800 x174.

Sincerely,

Brooke Williams Corporate Paralegal

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