## 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F01000000531 1. Entity Name |ANYWHERE SOLUTIONS, INC. Principal Place of Business Mailing Address Mailing Ad

## FILED Aug 18, 2002 8:00 am Secretary of State

08-18-2002 90129 030 \*\*\*550.00

974880

DO NOT WRITE IN THIS SPACE

DUBLIN, CA		City & State DUBUN, CA		4. FEI Number 94-3	4. FEI Number 94-3315642		oplied For ot Applicable	
9456	18 ALAMEDA	94568	ALA MEDA	5. Certificate of Status	Desired	8.75 Ade	ditional ed	
	6. Name and Address of Current R	legistered Agent		7. Name and Address of New Registered Agent				
				-Name				
CORPOR/	ATION SERVICE COMPANY	Chinat Adda	Original Addition (D.O. D. Markey L. Markey and C.)					
1201 HAY	'S STREET	Street Addres	Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32301-2525								
17007104	0055 15 05001 5050							
	٠		City		FL	Zip Cod	е	
8. The above named entity submits this statement for the numbers of changing its registers				torad agent or both in the S	tate of Florids Lam fo	miliar with	and agent	
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  Output  Date  Date								
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00  10. Election Campaign Financing \$5.00 May B								
	requirement and elects to do so.	2002 Fee will be \$75	50.00		\$5.0	May Be		
(See criteria on back)  Added to Fees  Added to Fees								
11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11								
TITLE	VCFO	☐ Delete	TITLE	·		Change	Addition	
NAME	VAN DER VORST, PIETER	CT Dolote	NAME			Onlings	Addition	
STREET ADDRESS	612 PASATIEMPO COURT		STREET ADDRESS		-			
CITY-ST-ZIP	PLEASANT.HILL CA 94523		CITY-ST-ZIP				ł	
TITLE	PD		TITLE	•			- I stre	
NAME	STEPIEN, TERRY	☐ Delete	TITLE NAME			Change	☐ Addition	
			STREET ADDRESS					
CITY-ST-ZIP ~~	CANADA N1H6J1	,	CITY-ST-ZIP					
· · · · · ·			1					
TITLE	VSD	☐ Delete	TITLE		!	Change *	☐ Addition	
NAME	CARL, DAN R		NAME					
STREET ADDRESS	1081 COUNTRY CLUB		STREET ADDRESS					
CITY-ST-ZIP	MORAGA CA 94556		CITY-ST-ZIP					
TITLE	VT	☐ Delete	TITLE			Change	☐ Addition	
NAMÉ	IREY, SCOTT		NAME				i	
STREET ADDRESS	324 MERRILEE PLACE		STREET ADDRESS					
C/TY-ST-ZIP	DANVILLE CA 94526		CITY-ST-ZIP					
TITLE	AS	☐ Delete	TITLE			Change	Addition	
NAME	CHUH, TERESA D		NAME					
STREET ADDRESS	1029 NEILSON STREET		STREET ADDRESS					
CITY-ST-ZIP	ALBANY CA 94706		CITY-ST-ZIP				,	
TITLE		☐ Delete	TITLE			Change	Addition	
NAME		23 00000	NAME		,	+		
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
13. I hereby o	certify that the information supplied with the	nis filing does not qualify for the	he exemption stated in	Section 119 07/2\/i\ Elected	Statuton   further and	(that tha i-	formation	
indicated	on this report or supplemental report is to	rue and accurate and that mu	reignature chall have th	a sama lanal affact as if mad	Se under eath, that Lan	y mai me if	or dispeter	

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: SIGNATURE AND

SIGNATURE AND TYPED OR PRINTEP NAME OF SIGNING OFFICER OR DIRECTOR

8-12-22

925-236-5000

Daytime Phone #