

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90313 020 ***150.00

0659451 AT

DOCUMENT # **F02000003356**

1. Entity Name
YIPES ENTERPRISE SERVICES, INC.



Principal Place of Business
**114 SANSOME STREET
14TH FLOOR
SAN FRANCISCO CA 94104**

Mailing Address
**114 SANSOME STREET
14TH FLOOR
SAN FRANCISCO CA 94104**

10100000



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **01-0704547**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Delete |
|-------|-------------------|----------------------|-------------------------|-------------------------------------|
| PSTC | HAQUE, PROMOD | 114 SANSOME STREET | SAN FRANCISCO CA 94104 | <input type="checkbox"/> |
| VD | BERCOVICH, LARRY | 114 SANSOME STREET | SAN FRANCISCO CA 94104 | <input type="checkbox"/> |
| AS | LAZAROW, WARREN T | 2000 UNIVERSITY AVE. | EAST PALO ALTO CA 94303 | <input checked="" type="checkbox"/> |
| AS | HILLFIELD, TED S | 2000 UNIVERSITY AVE. | EAST PALO ALTO CA 94303 | <input checked="" type="checkbox"/> |
| AS | TSAI, JERRY | 2000 UNIVERSITY AVE. | EAST PALO ALTO CA 94303 | <input checked="" type="checkbox"/> |
| D | GEESLIN, KEITH | 114 SANSOME STREET | SAN FRANCISCO CA 94104 | <input type="checkbox"/> |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Change | Addition |
|-------|--------------|--------------------|-------------------------|-------------------------------------|-------------------------------------|
| C | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| V/S | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| P/D | Dennis Muse | 114 Sansome Street | San Francisco, CA 94104 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| V/T | Kurt Johnson | 114 Sansome Street | San Francisco, CA 94104 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| V | Tim Mason | 114 Sansome Street | San Francisco, CA 94104 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/03
Date

415 901-2000
Daytime Phone #

CR2E034 (10/02)