2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

SEATTLE WA 98102

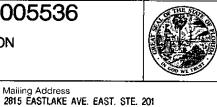
F02000005536 **DOCUMENT #**

1. Entity Name

SEATTLE WA 98102

Principal Place of Business 2815 EASTLAKE AVE. EAST. STE. 201

GIFTCERTIFICATES.COM CORPORATION



FILED Feb 03, 2003 8:00 am Secretary of State 02-03-2003 90069 005 ***150.00

90016196

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2. Principal I	Place of Business	3. Mailing Address		- 1807108 1111 80118 1101 8011 80111 80111	10:01 0:121 51:05 11:13 \$:11 :00			
	气管 。	SE STATELAN	5					
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
		131		☐ CHECK HERE IF MAKING	3 CHANGES			
City & Sta	te	City & State		4. FEI Number 12_4120700	Applied For			
,		SHITTLE	主じ合	4. FEI Number 13-4138788	Not Applicable			
Zip	Country	Zip_	Country		\$8.75 Additional			
·	,	10621		5. Certificate of Status Desired	Fee Required			
6. Name and Address of Current Registered Agent			-	7. Name and Address of New Registered Agent				
		· · · · · · · · · · · · · · · · · · ·	Name					
CT CORPORATION SYSTEM			_					
1200 S. PINE ISLAND RD		Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
	ON FL 33324							
Danimi	ON 1 E 50024							
	,1\$		City	FL	Zip Code			
9 The above	·	the manager of the control in			-			
the obligation	tions of registered agent.	the purpose of changing its	registered office or regi	istered agent, or both, in the State of Florida. I am	familiar with, and accept			
9								
SIGNATURE								
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE	: Registered Agent signature rec	quired when reinstating) DATE				
F	ILE NOW!!! FEE IS \$150.00							
Afte	r May 1, 2003 Fee will be \$550.00			9. Election Campaign Financing	\$5.00 May Be			
Make Check	k Payable to Florida Department of	State		Trust Fund Contribution.	☐ Added to Fees			
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND) DIRECTORS IN 11			
TITLE	DCP	☐ Delete	TITLE	ADDITIONO/CHANGES TO OTTICENS AND				
NAME	AHERN, MICHAEL	La Derete	NAME	•	Change Addition			
STREET ADDRESS	2815 EASTLAKE AVE. EAST, STE.	201	STREET ADDRESS					
CITY-ST-ZIP	SEATTLE WA 98102		CITY-ST-ZIP	•				
TITLE	Τ							
NAME	FLETCHER, DOUGLAS	☐ Delete	TITLE		☐ Change ☐ Addition			
STREET ADDRESS	2815 EASTLAKE AVE. EAST, STE.	201	NAME CERET APPRECE					
CITY-ST-ZIP	SEATTLE WA 98102	201	STREET ADDRESS					
			CITY-ST-ZIP					
TITLE	S HILLS	☐ Delete	TITLE		☐ Change ☐ Addition			
NAME	BROOKS, JULIE	b√	NAME					
STREET ADDRESS	2815 EASTLAKE AVE. EAST, STE.	201	STREET ADDRESS					
CITY-ST-ZIP	SEATTLE WA 98102		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition			
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition			
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TITLE		☐ Delete	TITLE		☐ Change ☐ Addition			
NAME		<u> </u>	NAME .		□ Orlange □ Addition			
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
	portification information and the control of the co	-1						
indicated	entry mat the information supplied with the	ils liling does not quality for t	ine exemption stated in	Section 119.07(3)(i), Florida Statutes. I further cer	afy 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 truster ampowered 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 appears in Block 10 or Block 11 if changed.

SIGNATURE:

AND INEQUIREDMENAEL AHERN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-02 206568 25

CR2E034 (10/02)