

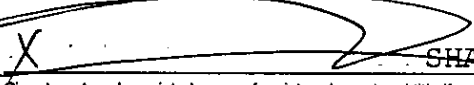
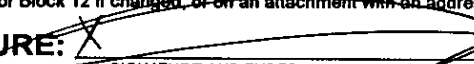
# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2001 8:00 am**  
**Secretary of State**

05-02-2001 90171 050 \*\*\*150.00

00046254

DO NOT WRITE IN THIS SPACE

<b>DOCUMENT #</b> F40234					
<b>1. Entity Name</b>					
PERICO ISLAND, INC.					
<b>Principal Place of Business</b>			<b>Mailing Address</b>		
P.O. BOX 161 BRADENTON BEACH, FL 34217			P.O. BOX 161 BRADENTON BEACH, FL 34217		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
1209 44TH AVENUE EAST			1209 44TH AVENUE EAST		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
<b>City &amp; State</b>		<b>City &amp; State</b>		<b>4. FEI Number</b>	
BRADENTON, FL		BRADENTON, FL		59-2137621	
<b>Zip</b>		<b>Country</b>		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
34203		USA			
<b>6. Name and Address of Current Registered Agent</b>					
GLASGOW, MARGARET ANITA 869 WATERSIDE LANE BRADENTON, FL 34209					
<b>7. Name and Address of New Registered Agent</b>					
Name GLASGOW, SHANNON					
Street Address (P.O. Box Number is Not Acceptable) 1209 44TH AVENUE EAST					
City BRADENTON, FL					
Zip Code 34203					
<b>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.</b>					
<b>SIGNATURE</b>  <b>SHANNON GLASGOW, PRESIDENT</b> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
<b>9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.</b> <input type="checkbox"/> (See criteria on back)			<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>		
<b>10. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>					
<b>11. OFFICERS AND DIRECTORS</b>					
<b>TITLE</b>	<b>P</b>				
<b>NAME</b>	GLASGOW, MARGARET ANITA <input checked="" type="checkbox"/> Delete				
<b>STREET ADDRESS</b>	869 WATERSIDE LANE				
<b>CITY - ST - ZIP</b>	BRADENTON, FL 34209				
<b>TITLE</b>					
<b>NAME</b>					
<b>STREET ADDRESS</b>					
<b>CITY - ST - ZIP</b>					
<b>TITLE</b>					
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<b>CITY - ST - ZIP</b>					
<b>TITLE</b>					
<b>NAME</b>					
<b>STREET ADDRESS</b>					
<b>CITY - ST - ZIP</b>					
<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>					
<b>TITLE</b>	<b>P</b>				
<b>NAME</b>	GLASGOW, SHANNON <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
<b>STREET ADDRESS</b>	1209 44TH AVENUE EAST				
<b>CITY - ST - ZIP</b>	BRADENTON, FL 34203				
<b>TITLE</b>					
<b>NAME</b>					
<b>STREET ADDRESS</b>					
<b>CITY - ST - ZIP</b>					
<b>TITLE</b>					
<b>NAME</b>					
<b>STREET ADDRESS</b>					
<b>CITY - ST - ZIP</b>					
<b>TITLE</b>					
<b>NAME</b>					
<b>STREET ADDRESS</b>					
<b>CITY - ST - ZIP</b>					
<b>13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.</b>					
<b>SIGNATURE:</b>  <b>SHANNON GLASGOW</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date <b>4/25/01</b> Daytime Phone #					