## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 14, 2002 8:00 am Secretary of State

05-14-2002 90070 010 \*\*\*150.00 DOCUMENT #1 1. Entity Name Sign Craft 656739 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business Mailing Address 8355 7399 Shadeland Ave \*166 Garden DO NOT WRITE IN THIS SPACE loung Real Rity & State 4. FEI Number Applied For - 0340 Not Applicable 33409 V5 F \$8.75 Additional 420 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent DO NOT WRITE orDoration Street Address (P.O. Box Numbel is Not Acceptable) IN THIS SPACE Sow Kogo City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible January 1 - May 1 Fee is \$150.00 Tax filing requirement and elects to do so After May 1, Fee is \$550,00 10. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE CR2E034B (12/01) NAME Dan E Young Blud suite 37-314 STREET ADDRESS STREET ADDRESS CITY-ST-7IP Los Vegos , NV 89103 CITY-ST-7IP THIE TILLE Alan V. Young 7399 Shedaland Ave, \$166 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME William A. 7.11'am A. Young 7.399 Shedeland Ave NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DO NOT WRITE <u>Indiana polis</u> IN 46250 CITY-ST-ZIP TITLE TITLE Summer Gollib IN THIS SPACE NAME NAME STREET ADDRESS 8355 Garden STREET ADDRESS CITY-ST-ZIP Riviera <u>FL</u> 33409 Beach CITY-ST-ZIP TITLE Linda Prusiecki NAME NAME STREET ADDRESS. Rock 8355 Garden STREET ADDRESS CITY-ST-ZIP 33409 CITY-ST-ZIP TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 accurage and that my signature shall have the same legal effect as if made under oath: that I am an officer or director attachment with an address, with all other like to powered. SIGNATURE: