FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jul 22, 2002 8:00 am Secretary of State

07-22-2002 90155 005 ***150.00

DOCUMENT # F 9800000 6620

1. Entity Name

CEL + OC A A DEB

CELtic AMERICAN LTD. INC.

DO NOT WRITE IN THIS SPACE			• •	
		B0130467		
Principal Place of Business 3. Mailin	g Address		•	
	Lph MOHINE			
12950 RIVET Rd. 12	Apr. #, etc. 2950 River Rd.	DO NOT WRITE IN THIS	S SPACE	
City & State My AKKA City of Low M	State VAKKA Citya Fla	4. FEI Number 88-0405099	Applied For Not Applicable	
Zip Country USA Zip 34	+251 Country 21.5		\$8.75 Additional Fee Required	
		7. Name and Address of Current Register	ed Agent	
DO NOT WOLTE	Name -	ALPH M. HINE		
DO NOT WRITE	Street Addr	ess (P.O. Box Number is Not Acceptable)		
IN THIS SPACE	129	12950 River Rd.		
	City My	AKKA City FI	Zip Code 34251	
8. The above named entity submits this statement for the purpos	e of changing its registered office or/reg	gistered agent, or both, in the State of Florida.	-	
SIGNATURE Ralph M. Hine			5,2002	
Signature, typed of finited name of registered agent and title if applica				
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Make	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 te Check Payable to Department of	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS	<u> </u>			
TITLE NAME RALPH M. HINE STREET ADDRESS 12950 RIVER Rd, FL. 34 CITY-ST-ZIP MYAKKA CITY FL. 34	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE TSYC, NAME MAPIA O. HINE STREET ADDRESS 12450 RIVER Rd, CITY-ST-ZIP NYAKKA CITY, FL. 342.	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
NAME MICHAEL R. SANCHEZ STREET ADDRESS 3450 Schrock ST. CITY-ST-ZIP SANASOTA, FL. 34239	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WR	ITE	
TITLE ,	TITLE	IN THIS SPA	CF	
NAME Street Address	NAME Street address			
CITY-ST-ZIP	CITY-ST-ZIP			
TITLE	TITLE NAME	2	- 5	
STREET ADDRESS	STREET ADDRESS		.	
CITY-ST-ZIP	CITY-ST-ZIP			
TITLE	TITLE			
NAME CIDECT ADDRESS	NAME .			
STREET ADDRESS CITY-SI-ZIP	STREET ADDRESS CITY-ST-ZIP			
13. I hereby certify that the information supplied with this filing do		n Section 110 07/0/Vi) Elevide Ctatute I forther		

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 on an attachment with an address, with all other like empowered.

CELL - 941-928-2000

**CELL - 9

July 15, 2002 941-322-8

-

SIGNATURE:

Celtic American Ltd Inc. Ralph M. Hine 12950 River rd. Myakka City, FL.34251

Dear Sir,

I regret our Uniform Business report being late as we failed to receive the form in the mail, possibly due to a mix-up in our mailling address.

If our future Unform Business reports could be sent to the following address it will be greatly appreciated.

Our check for \$150.00 is inclosed.

I thank you very much for your consideration.

Cencerly Yours Ralph M. Hine

Rolph M. Hine P.C.

Ralph M. Hine 12950 River rd. Myakka City, Fl.34251