FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Aug 20, 2003 8:00 am Secretary of State H97432 DOCUMENT # 08-20-2003 90052 017 ***150.00 1. Entity Name PREMACK AND ASSOCIATES OF PINELLAS, INC. Principal Place of Business Mailing Address 8130-66TH ST..N.#10 8130-66TH STREET NORTH PINELLAS PARK FL 33781 #10 PINELLAS PARK FL 33781 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 59-2669601 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PREMACK, AUDREY B. Street Address (P.O. Box Number is Not Acceptable) 8130 66TH ST., NO-#10 PINELLAS PARK FL 33781 City 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change TITLE TITLE ☐ Addition □ Delete PREMACK, AUDREY B NAME NAME 8130-66TH ST..N.#10 STREET ADDRESS STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change PREMACK, AUDREY B. NAME NAME STREET ADDRESS 8130-66TH ST. N. #10 STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 of 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.

CITY-ST-ZIP

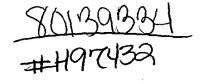
SIGNATURE:

CITY-ST-7IP

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attachment





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Civil Law Notary

August 18, 2003

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: Annual Report of Premack and Associates of Pinellas, Inc. For 2003

Dear Sir or Madam:

Enclosed is a check for \$ 150 to renew the corporate status of the above referenced corporation. Mrs. Audrey Premack, my client, is unable to include the Annual Report form because she never received it. Mrs. Audrey Premack is the sole shareholder, Director and Officer and all other information you have is correct. The Federal Identification number is 59-2669601.

Pardon this oversight but as you can see from the record, she has never missed filing when she was provided an Annual Report form.

If anything else is needed, please contact me at 727/588-9551.

Sincerely,

Drucilla E. Bell For the Firm