2002 UNIFORM BUSINESS REPORT (UBR)					FILED Feb 26, 2002 8:00 am Secretary of State		
DOCUMENT # J04290  1. Entity Name							
TOTAL L	IFE CONCEPTS, INC.				02-26-2002 9003		
Principal Place of Business  * CHARLES W. BARRY, JR.  ** CHARLES W. BARRY.  ** LONGWOOD FL 32750						1717 <b>2</b> 1817 <b>218</b> 17 <b>218</b> 11	<u> </u>
2. Principal Place of Business  SUITE STOVEN COOP Suite, Apt. #, etc.  3. Mailing Address  Suite, Apt. #, etc.			over Lu	VER LOOP		FE IN THIS SPACE	
LAKE	MARY, ALMEDI	LITKE MARY	-Conzo	J 4.	FEI Number <b>59-2664474</b>		oplied For ot Applicable
3279	· · · · · · · · · · · · · · · · · · ·	32746	Country		Certificate of Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Currer	nt Registered Agent		7. 1	Name and Address of New Register	ed Agent	
- · · ·	i	* *** = * **	~ Name	CHARL	ES W BARRY J	k	
Barry, Charles W., Jr. <del>1033 Windy Bluff Pt.</del>				Street Address (P.O. Box Number is Not Acceptable)			
LONGWOOD FL-32759—			City	565	MESTONEX LOUP	Tim Cod	
	•		City Z	AKCE	MARY F	FL   少分	746
Tax filing requirement and elects to do so. After May 1, 2002			•	00 50.00	acom - 19	\$5.0	0 May Be
		Make Check Payab					
11.	OFFICERS AN		12.	PO AC	DDITIONS/CHANGES TO OFFICERS A		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD : BARRY, CHARLES W., JR. -1653-WINDY-BLUFF PT. -LONGWOOD-FL	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	CHANLE	N W. BARRY, TK. Westover Loup MINNY FC 32741	Change	Addition   S
TITLE NAME *STREET ADDRESS	ST ; BARRY, CONNIE LOU 1683 WINDY BLUFF PT.	☐ Delete	TITLE NAME STREET ADDRESS	ST Co	MIMY, FC 3274C NUTE LOU BARRY S WESTOVER LOUP IKE MARY, FC 32	Change	Addition
TITLE NAME STREET ADDRESS -CITY-ST-ZIP	_L <del>ONGWOOD</del> FL	Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	,	☐ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition
CITY-ST-ZIP			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 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 attachore; with an address, with all other the empowered.

CITY-ST-ZIP

SIGNATURE!

ESW BARRY, IN PRINCENT 2/4/02