FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # 02 APR 19 PM 2: 02 1. Entity Name E&H Services, INO SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State BudendskiffL Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE) Box Number is Not Acceptable) IN THIS SPACE stered agent, or both in the State of Florida. 8. The above named entity submits this statement for the purpose of changing its registered office January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. TITLE TINE TUTLE NAME 300005326563---04723702--01058--017 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TATLE mu i 🕏 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TO SAIL S TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-70P mie, g IN THIS SPACE HAME THE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE me NAME NAME STREET ADDRESS SERFET ADDRESS CITY-ST-ZIP CITY+ST-ZIP TITLE TITLE * NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP 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 on an attachment with an address, with all other fike empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Eugene G. Hammer E & Hservices, Inc.

3281 N.W. 65th street Fort.Lauderdale, Fl. 33309 954-979-8988 ehammer@, stis.net

April 18, 2002

Sean Toner
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Ref number: K74256

Dear Mr. Toner,

Per our phone conversation, on 4/17/2002..:

I or my wife did not received, the 1997 report form and as I was sick (stroke)

I could not follow up on any thing, sorry this is a problem.

The check and document for E & H Services are being returned.

Thank you again for your help in this matter.

Sincerely,

Eugene Hammer

E & H Services, Inc.