2002 UNIFORM BUSINESS REPORT (UBR)

Jul 24, 2002 8:00 am Secretary of State L77720 DOCUMENT # 1. Entity Name 07-24-2002 90133 042 ***150.00 HTRS, INC. Principal Place of Business Mailing Address C/O DAVID KRUZEL C/O DAVID KRUZEL 8181 W. BROWARD BLVD., STE. 350 8181 W. BROWARD BLVD., STE. 350 PLANTATION FL 33317-2204 PLANTATION FL 33317-2204 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0182342 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KRUŻEL, DAVID M. Street Address (P.O. Box Number is Not Acceptable) 8181 W. BROWARD BLVD STE. 350 PLANTATION FL 33324 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. I am familiar with, and accept the obligations of registered agent. THE REPORT OF THE PROPERTY OF THE PARTY OF T SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 品程程。在EDATE只要目前到推定链套直接 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filling requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Circ(See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITI F ☐ Change ☐ Addition WACKS, EDWARD NAME NAME 8181 W BROWARD BV STE 350 STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 CITY-ST-ZIP CITY-ST-7IP SD ☐ Delete TITLE ☐ Change ☐ Addition NAME KRUZEL, DAVID M. NAME STREET ADDRESS 8181 W. BROWARD BLVD. STREET ADDRESS CITY-ST-ZIP PLANTATION FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

STREET ADDRESS

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 attachment with an address, with all other like empowered.

FILED

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Affachmant #177721 122708

July 19, 2002

Division of Corporations Uniform Business Report PO Box 1500 Tallahassee, FL 32302

Re: HTRS, Inc.

To Whom It May Concern:

Enclosed is the 2002 Uniform Business Report. I am requesting that the late filing penalty be abated for the following reason. I have always filed this form on time. When I asked my bookkeeper if the payments to the State were made I was told they were. Unfortunately the bookkeeper thought I meant the intangible tax return. The bookkeeper stated that she never received the Uniform Business Report.

Please accept the enclosed payment.

This will not happen again.

Thanking you in advance for your consideration regarding this matter.

Sincerely,

Edward A. Wacks