FILED
Jun 27, 2002 8:00 am
Secretary of State

01-30-2002 90167 038 ****61.25

95251

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000002712

1. Entity Name

VIRTUOUS SOCIAL SERVICES, INC.

Principal Place of Business	Mailing Address
583 BRANTLEY TERRACE WAY #100 ALTAMONTE SPRINGS FL 32714	PO BOX 163151 ALTAMONTE SPRINGS FL 32716-3151

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
583 Brantley Terrace Way	P.O. Box 163151
Suite, Apt. #, etc.: Unit #100	Suite, Apt. #, etc.
City & State: Altamonte Springs, FL	City & State: Altamonte Springs, FL
Zip: 32714-0826 Country: USA	Zip: 32716-3151 Country: USA

4. FEI Number: 59 3715101 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROBINSON, DOMONIC D 583 BRANTLEY TERRACE WAY #100 ALTAMONTE SPRINGS FL 32714	Name: There are NO new registered Agent's! Street Address (P.O. Box Number is Not Acceptable): City: FL 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.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

I would like to contribute to my 9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: President, Miss Domonic D. Robinson address above ... ☐ Delete	TITLE D / NAME Miss Millie Finkbinder / STREET ADDRESS 583 Brantley Terrace Way #200 / CITY-ST-ZIP Altamonte Springs, FL 32714 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: There are NO other Officers & Directors ☐ Delete	TITLE T / NAME Carolyn Brown / STREET ADDRESS 207 Ivey Home Road J-2 / CITY-ST-ZIP Hampton, VA 23669 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: Correction ☐ Delete	TITLE D / NAME Edward Duffy / STREET ADDRESS 983 Great Bend Road / CITY-ST-ZIP Alt Spgs, FL 32714 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: ON the right. ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition

CR2E037 (9/01)

12. 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 617, 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.

SIGNATURE: Miss Domonic D Robinson 01-13-02 (407)297-9683

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Corrected 01-22-02

Corrected 05-19-02

(407) 297-9683

(407) 297-9683-0