

9/13/01-90001-010-\$70.00-\$70.00

## 2001 UNIFORM BUSINESS REPORT (UBR)

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

01 SEP 24 PM 12:32

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DO NOT WRITE IN THIS SPACE

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------|--|
| DOCUMENT # <b>1994000002356</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  |
| 1. Entity Name <b>PHOENIX ENTERPRISE GROUP, INC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                   |  |
| Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Mailing Address                   |  |
| <b>2725 66TH TERRACE SOUTH</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <b>← SAME</b>                     |  |
| <b>ST. PETERSBURG</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>FLA. 33712</b>                 |  |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | 3. Mailing Address                |  |
| <b>2725 66TH TERRACE SOUTH</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <b>2725 66TH TERRACE S</b>        |  |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Suite, Apt. #, etc.               |  |
| City, State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | City, State                       |  |
| <b>ST. PETERSBURG FLORIDA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <b>ST. PETERSBURG, FLORIDA</b>    |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Zip                               |  |
| <b>33712</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | <b>33712</b>                      |  |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Country                           |  |
| <b>USA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <b>USA</b>                        |  |
| 4. FEI Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Applied For                       |  |
| <b>59-3237664</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | Not Applicable                    |  |
| 5. Certificate of Status Desired                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 5. \$8.75 Additional Fee Required |  |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | <input type="checkbox"/>          |  |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                   |  |
| Street Address (P.O. Box Number is Not Acceptable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                   |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                   |  |
| FL Zip Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |  |
| 7. Name and Address of New Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                   |  |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                   |  |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                   |  |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                   |  |
| DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                   |  |
| FILE NOW: FEE IS \$61.25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                   |  |
| After September 12, 2001, min. will be \$238.25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  |
| 9. Election Campaign Financing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                   |  |
| Trust Fund Contribution <input type="checkbox"/> \$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-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                   |  |
| PRESIDENT LIONEL V ROBERTS D 2725 66TH TERRACE ST. PETERSBURG, FL 33712                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                   |  |
| SECRETARY LINDA ADAMS D 758 61ST AVE S ST. PETERSBURG, FL 33705                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  |
| VICE PRESIDENT ROBERT L BROWN D 6261 19TH ST S ST. PETERSBURG, FL 33712                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                   |  |
| TREASURER SOLOMON STEPHENS D 2601 59TH AVE S ST. PETERSBURG, FL 33712                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                   |  |
| DIRECTOR DAVID ZACHEM D 5127 CAESAR WAY S ST. PETERSBURG, FL 33712                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                   |  |
| DIRECTOR EDWIN VAN D 2019 ANASTASIA WAY S ST. PETERSBURG, FL 33712                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                   |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(d), 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 feeder 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: LIONEL V ROBERTS 9/8/01 721-967 3663                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                   |  |

Attachment 978191 #1094000062306  
NEW DIRECTORS FOR PHOENIX ENTERPRISE INC

RAPHAEL BARRIMOND - DIRECTOR - ADDITION  
6696 18<sup>TH</sup> ST S  
ST. PETERSBURG, FLA 33712

BETTIE J. Powell DIRECTOR ADDITION  
1024 59<sup>TH</sup> AVE S  
ST. PETERSBURG, FL, 33705

JAMES BENNET DIRECTOR ADDITION  
768 PINELLAS POINT DR S  
ST. PETERSBURG FLA 33705

CHARLES Payne DIRECTOR  
420 1/2 15<sup>TH</sup> AVE SOUTH  
ST. PETERSBURG, FL, 33711