## FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jul 10, 2001 8:00 am **Secretary of State** Custom Data 06-21-2001 90003 038 \*\*\*150.00 Principal Place of Business Mailing Address 2. Principal Place of Business 3. Mailing Address River Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 361607 Not Applicable **59**-Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change ☐ Delete TITLE TITLE President NAME Adrian Johnson 3812 River Hills Dr NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition ☐ Change TITLE TITLE ☐ Detete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Deleta TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITL F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling 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 of the corporation or the receiver or trustee empowered to exchanged, or on an attachment with an address, with an other SIGNATURE: Daverne Phone #

Alfachment P000000001035

July 2, 2000

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: P0000001035

To Whom It May Concern:

We have received a notice from your office which requires us to pay a late fee in addition to the amount we have already sent in order for you to process our UBR. Please waive this late fee and process our UBR with the amount (\$150) from our check which your office has already cashed.

We have never filed a UBR before (this was our first year of business) and never received a UBR. We had no way of knowing that we needed to file a UBR or that such a UBR document even existed. We only heard of the UBR in passing recently and immediately requested a blank UBR which we submitted ASAP.

A representative from your office instructed us not to send the late fee with our payment and said that the late fee would be waived due to these circumstances.

We will make every effort in the future to submit a UBR on time even if You do not send us a UBR now that we know that it is due. Thank you for your time.

Sincerely,

Adrian Johnson

President

Custom Data Design, Inc.