## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

with all other like empowered

## May 25, 2001 8:00 am Secretary of State DOCUMENT # P00000002078 05-25-2001 90286 044 \*\*\*150.00 QUWALA OF FLORIDA, INC. Principal Place of Business Mailing Address PO BOX 1011 321 SAINT ANDREWS DRIVE NICEVILLE FL 32578 NICEVILLE FL 32588 660357 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3608898 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 Name FRANCIS, KENNETH E Street Address (P.O. Box Number is Not Acceptable) 321 SAINT ANDREWS DRIVE NICEVILLE FL 32578 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable, (NO1: Registered Agent signature required when reinstating) FILE NOW !! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2: 01 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 Paya le to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Change TITLE ☐ Delete TITLE FRANCIS, KENNETH E NAMĘ NAME 321 SAINT ANDREWS DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete Addition TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete ~ -☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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



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Attachment 660359

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

DOC# P00000 002078

RE: Ouwala of Florida, Inc.

2001 Uniform Business Report

Dear Sir or Madam:

Enclosed is the 2001 Uniform Business Report for Quwala of Florida, Inc. I am sorry for the late arrival, but the owners switched certified public accountants this year and I was unaware that the prior accountant routinely reminded the owners as to when the Uniform Business Report was due. The report's tardiness is through no fault of the owners and the late fee would be a heavy financial drain on a company of their limited resources. Please make an exception this year and waive the late fee.

Thanks,

Stephen Shelton

Certified Public Accountant

Stophen Shellon CPA