

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000011098

1. Entity Name  
CITRINET, INC.Principal Place of Business  
10680 WASHINGTON STREET STE 201  
PEMBROKE PINES FL 33025Mailing Address  
10680 WASHINGTON STREET STE 201  
PEMBROKE PINES FL 330252. Principal Place of Business  
4001 NORTH 37<sup>th</sup> Ave.  
Suite, Apt. #, etc.3. Mailing Address  
4001 NORTH 37<sup>th</sup> AVE  
Suite, Apt. #, etc.City & State  
HOLLYWOOD FLCity & State  
HOLLYWOOD FL

Zip 33021 Country USA

Zip 33021 Country USA

4. FEI Number 65-0979485  
Applied For  
Not Applicable5. 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

ITAH, TAMMY  
10680 WASHINGTON STREET STE 201  
PEMBROKE PINES FL 33025

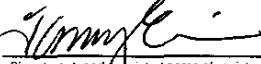
Name TAMMY EDRICH

Street Address (P.O. Box Number is Not Acceptable)

4001 NORTH 37<sup>th</sup> AVE  
City HOLLYWOOD

FL Zip Code 33021

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 reinstating)

3/19/02

DATE

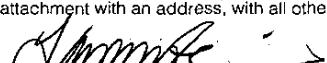
9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EDRICH, BRUCE A 10680 WASHINGTON STREET STE 201 PEMBROKE PINES FL 33025	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ITAH, TAMMY 10680 WASHINGTON STREET STE 201 PEMBROKE PINES FL 33025	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD EDRICH, TAMMY T 4001 NORTH 37 <sup>th</sup> AVE HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:  Tammy Edrich

3/19/02 (954) 450-4851

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

0156365  
AV

CR2E034 (9/01)