Daytime Phone #

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR

## Aug 23, 2001 8:00 am Secretary of State DOCUMENT # P00000018016 1. Entity Name 08-23-2001 90001 014 \*\*\*150.00 PRO-ACTIVE ENTERPRISE SOLUTIONS, INC. Principal Place of Business Mailing Address 10556 N.W. 26TH ST., STE. 203 10556 N.W. 26TH ST., STE. 203 UUU75486 MIAMI FL 33172 MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address 6278 N Federal Hwy 6278 N Federal Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE # 498 # 498 City & State F+ Landerdale 4. FEI Number Applied For Carderdale FL 65-0985374 Not Applicable Country US A \$8.75 Additional 5. Certificate of Status Desired 33308 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARROM, ORLANDO Street Addr 10556 N.W. 26TH ST., STE. 203 **MIAMI FL 33172** Zip Code 3330 & Lander date 8. The above name ment for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printe agent and title if applicable FILE NOW!!! FEE IS \$550.00 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (5/01)TITLE TITLE Change Delete Œ NAME ARROM, ORLANDO wood, Robert 10556 N.W. 26TH ST., STE. 203 Federal Hwy S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF **MIAM! FL 33172** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 supplied to structure 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 expowered 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 a haddress with all other like empowered.

OF SIGNING OFFICER OR DIRECTOR

Attachment Otto005486

## PRO-ACTIVE ENTERPRISE SOLUTIONS, INC. 6278 N. FEDERAL HIGHWAY SUITE SUITE 498 FORT LAUDERDALE, FLORIDA 33308

August 14, 2001

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

RE: UNIFORM BUSINESS REPORT
PRO-ACTIVE ENTERPRISE SOLUTIONS, INC.
DOCUMENT # P00000018016
F.E.I.N. # 65-0985374

Dear Sir/Madam: ---

Please be advised that we did not receive the pre printed/original Uniform Business Report Packet for 2001 for the above-mentioned corporation as we moved our office and our mail was not properly forwarded.

Enclosed please find a check in the amount of \$150.00 for the original fee with the signed report.

Thank you for your cooperation in this matter.

Sincerely

Mahmoud Babikir

Accountant for Pro-Active Enterprise Solutions, Inc.