2002 UNIFORM BUSINESS REPORT (UBR)

Jul 28, 2002 8:00 am Secretary of State P00000019018 DOCUMENT # 1. Entity Name 07-28-2002 90199 009 ***150.00 YES I CAN, INC. Principal Place of Business Mailing Address 1423 CR 650 1423 CR 650 BUSHNELL FL 33513 BUSHNELL FL 33513 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0991461 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JORDAN, EDWARD P II Street Address (P.O. Box Number is Not Acceptable) 13543 EAST HWY 50 CLERMONT FL 34711 City 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. I am familiar with, and accept the obligations of registered agent. JORDAN JI EDWARD P. 7-25-07 SIGNATURE ped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition SMALLWOOD, MICHAEL F NAME NAME 1423 CR 650 STREET ADDRESS STREET ADDRESS **BUSHNELL FL 33513** CITY-ST-7/P CITY-ST-ZIP Connie Smallwood 1423 CR 650 TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS Bushnell, FL 33513 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ 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-7IP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS

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.

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

Davtime Phone #

FILED

AHachment Dr. # 20000019018 122969

"YES I CAN, INC."

Behavorial Services P.O. Box 1756 2022 N. County Road 470 Lake Panasoffkee, FL 33538 (352) 569-5381

July 25, 2002

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

RE: Yes I Can, Inc.

2002 Annual Report

To Whom It May Concern:

I am President, Secretary, Vice President and Treasure of Yes I Can, Inc, which is a corporation formed on February 18, 2000, and assigned document number P00000019018 ("the Corporation"). I am also the sole director and shareholder of the Corporation.

Earlier this month I learned that the Corporation did not timely file its Annual Report for 2002 and that, due its failure to file the annual report, an additional fine is being imposed. For this reason I am writing requesting a waiver of the fine for the following reason.

I did not receive the annual report from the Secretary of State and only learned of the non-filing when meeting with my attorney to update our minute book. My lawyer obtained a copy of the annual report off the Internet and I am enclosing the same for filing along with my filing fee. Had I received a copy of the report I would have timely responded to the same; however, I never received the report. Likewise, my lawyer did not receive a report.

I respectfully request that your office waive the late fee and consider my report timely filed.

Attachment 200000019018 Dx.# 20000019018

July 25, 2002 Page 2

I have made my statements herein based on my personal knowledge and affirmatively state that all statements contained herein are true and correct and based on my personal knowledge.

Sincerely,

Connie Smallwood President, Director

STATE OF FLORIDA)
COUNTY OF LAKE)

BEFORE ME, personally appeared Connie Smallwood, who after being duly sworn according to the law, deposes and states that she is the President and Director of Yes I Can, Inc. and that she has the actual, implied and apparent authority to execute the foregoing letter on behalf of the Corporation and bind the Corporation to the terms thereof and that she has executed the foregoing letter and attests, affirms, swears and acknowledges that the statements contained therein are true and correct based on her personal knowledge.

<u>Darbara Sue Ward</u> Notary of Public

Barbara Sue Ward

My Commission CC767152

Expires August 13, 2002

FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

AHadnert # 70000019018

1. Entity Name YES I CAN, INC.				120	\$69
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·				DO NOT WRITE IN TH	HIS SPACE
City & State Clermont, FL		City & State Clermont, FL		4. FEI Number	Applied For Not Applicable
Zip 3471	Country Lake	Zip 34711	Country Lake	5. Certificate of Status Desired	\$8.75 Additional Fee Required
			3	7. Name and Address of Current Registe	•
	DO NOT IN THIS S		Street Address 1423 CR		- Zin Codo
8. The above	named entity submits this statemen	at for the purpose of changing	City Clermont	Ered agent, or both, in the State of Florida.	Zip Code 34711
SIGNATURE 5 9. This corporate filing r	EDWARD P. JORDAN., I. Signature, typed or printed name of registered a pration is eligible to satisfy its Intangequirement and elects to do so.	I, esq	May 1 Fee is \$150.00 May 1 Fee is \$150.00 20 1 Fee is \$550.00 21 25 22 26 Comment of State and State	d when reinstating) 10. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
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	ertify that the information supplied w	rith this filing does not qualify f	CITY-ST-ZIP or the exemption stated in Se	ction 119.07(3)(i). Florida Statutes, Lifurther c	Ortifu that the informati

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 attachment with an address, with all other like empowered.

SIGNATURE: Connie Smallwood

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352056804466

Daytime Phone #