FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jul 20, 2001 8:00 am P00000023620 Secretary of State DOCUMENT # 1. Entity Name 07-20-2001 90001 048 \*\*\*150.00 RISING ABOVE EXPECTATIONS, INC. Principal Place of Business Mailing Address 200\_73RD\_AVENUE N. -200-70RD AVENUE N. APT. 102 APT -102 -ST. PETERSBURG FL 90702 ST. PETERSBURG FL 33702 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired MSCO Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ACCOUNTING & TAX HELP, INC. Street Address (P.O. Box Number is Not Acceptable) 8668 PARK BLVD. SUITE A SEMINOLE FL 33777 Zip Code FL 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. DATE FILE NOW!!! FEE IS \$550.00 9. 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Delete TITLE STEIN. CHERYL STEIN, CHERYC NAME 200 73RD AVENUE N. STREET ADDRESS STREET ADDRESS ST. PETERSBURG-FL 33702 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE -. Delete NÂME' NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

Alfachment #P00000023620 B0060253

DATE 07-11-01

To Whom it may Concern at the Florida Department of State,

This is our first year filing. I have moved and NEVER RECEIVED my UBR., UNTIL IT WAS LATE. Please abate the \$400.00 additional fee. I had intended to file this in a timely fashion, but circumstances beyond my control prevented me from doing so. Please know that this will never happen again.

Respectfully yours, CHERYL STEIN

Cheryl Stein