2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Sep 12, 2001 8:00 am Secretary of State P00000023637 DOCUMENT # 1. Entity Name 09-12-2001 90158 046 ***150.00 PRO TOOLS, INC. Principal Place of Business Mailing Address 16910 DIPOLOMAT DRIVE 16910 DIPOLOMAT DRIVE SPRING HILL FL 34610 SPRING HILL FL 34610 2. Principal Place of Bysiness 3. Mailing Address DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Age Name SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134 8. The above named ntity submits this stateme purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 4 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 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 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. CR2E034 (5/01) IENST, DALE L. Change Addition TITLE ☐ Delete TITLE DIENST, DALE L NAME: NAME 38 HULETT DR. 16910 DIPOLOMAT DRIVE STREET ADDRESS STREET ADDRESS SPRING HILL FL 34610 CITY-ST-ZIP CITY-ST-ZIP 🔽 Delete ☐ Change ☐ Addition TITLE TITLE DIENST, STELLA L NAME NAME 16910 DIPOLOMAT DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SPRING HILL FL 34610 - Delete → ☐ Addition THIF ____ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in 13. I hereby certify that the information supplied with changed, or on an atta

BOUGUGOO POOOOO23637 DEAR; KATHERINE HARRIS AND STAFF

I WISH TO APPOLIGISE FOR NOT FILING THE UNIFORM BUSINESS SOONER. UNFORTUNATLY IGNORANCE IS MY ONLY DEFENCE. THIS IS THE FIRST YEAR OF RENEWAL FOR MY CORPORATION AND IM AWAIR THAT I HAVE ALOT TO LEARN.I WENT THRU A DIVORCE, MOVED MY PLACE OF RESIDENCE AND MY PLACE OF BUSINESS, AND TOOK OVER THIS END OF THE BUSINESS, SO PLEASE BEAR WITH ME I WILL GET THE HANG OF IT. PS; THIS WAS THE FIRST NOTICE I RECIEVED. ENCLOSED IS A CHECK FOR \$150.00 PLEASE CALL IF NOT SUFFICENT.

THÁNKS AGAIN!!!!

DALE L DIENST PRO TOOLS INC. 813-244-9310