FILED Jun 30, 2003 8:00 am Secretary of State

TOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

| UNITURM BUSINESS REPURT (UDK) | | | | 05-19-2003 90214 020 ***150.00 | |
|--|--|---|--------------------------------|---|--|
| DOCUMENT # P00000038758 1. Entity Name THE CROSBY GROUP | | | | | |
| | DO NOT WRITE | | PACE | 5505 | 60316 |
| Suite, Apt | ARSUA WAY *, etc. | 3. Mailing Address 8293 / Suite, Apt. #, etc. | ger War | DO NOT WRITE IN THIS S | PACE |
| City & Star | ON BEACH, FL. | City & State Co YWTON BE | eru Fi | 4. FEI Number 65-0999251 | Applied For Not Applicable |
| Zip 7343 | 1 Pain REALH | Zip 33437 | Sountry Remix | 5 Certificate of Status Desired | 8.75 Additional |
| 30,0 | | <u> </u> | 72 KXX23 | 7. Name and Address of Current Registered | |
| ALC: N | DO NOT W | DITE | Name 346 | CROS31- | |
| DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) - | | | | | |
| | : IN THIS SP | AUE | 8293 | MARSALA WAY | , |
| City BOKETON BEACH FL 320042 | | | | | |
| 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. | | | | | |
| | | | | | |
| SIGNATURE Signature, typed or provided name of registored agent and title if apphoable. (NOTE: Registated Agent signature required when reinstating) EIATE | | | | | |
| | nutry i May Fee is \$150.00 After May 1 Fee is \$550.00 Amended URR is \$61.25 Payable to Florida Department of | State | | 9. Election Campaign Financing Trust Fund Contribution. | \$5.00 May Be Added to Fees |
| 10. | OFFICERS AND C | | kmie sowe a se de | | East Division () |
| NAME | BOOL POGEY | | NAME | | 1802 |
| STREET ADDRESS CITY-ST-ZIP | 8298 MARKALA WITH BOUNDER BEACK FL | | STREET ADDRESS | | |
| TITLE | VILL PRESIDENT | 33737 | Sime 2 | | CR2E0348 |
| NAME | Now CROSAY 0293 MARGALA WA | · v | NAME | | 100 |
| STREET ADDRESS CITY-ST-ZIP | BOYNTON ASSACH | F 33037 | STREET ADDRESS COTY ST. ZIP | | |
| TITLE | | | mu . | | |
| NAME STREET ADDRESS | Service of the servic | | NAME: STREET ADORESS | | _ |
| CITY-ST-ZIF | | | CITY ST 2P | DO NOTAWRIT | Service Control Control |
| TITLE NAME | | | TITLE | IN THIS SPAC | E |
| STREET ADDRESS | | | STREET ADDRESS 19 | | and the second second second |
| CITY-ST-ZIP | | | CITY ST DE | | |
| NAME | | | NAME | | |
| STREET ADDRESS CITY-ST-ZIP | | | STREET ADDRESS 1 | | |
| TITLE | | | inte | | |
| NAME STREET ADDRESS | | | NAME STREET ADDRESS | | |
| CITY-ST-ZIP | <u> </u> | · | CITY-ST: ZIP | | A STATE OF THE STA |
| 12. 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 if 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 10 or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: SVO. CROSSY & SVD-(180594 5-14-03 5-81-732-1326) | | | | | |

Allachment

MAY 14, 2003

TO WHOM IT MAY CONCERN,

90000028758

ENCLOSED IS MY \$150.00 CHECK FOR THE UNIFORM BUSINESS REPORT. I DO REALIZE THAT AFTER MAY 1ST THE COST WAS TO GO UP TO \$550.00. HOWEVER, AFTER REVIEWING MY CHECKS WRITTEN FOR TAX PURPOSES, I REALIZED I HAD NOT WRITTEN THE UNIFORM BUSINESS REPORT CHECK. I HAD NEVER RECEIVED THIS DOCUMENT. I CALLED YOUR OFFICE ON MAY 7, 2003.—THE-GENTLEMAN I-SPOKE TO-EXPLAINED THAT THE REASON WE MAY NOT HAVE RECEIVED THE REPORT IS BECAUSE WE MOVED ON JANUARY 7, 2003 TO 8293 MARSALA WAY, BOYNTON BEACH, FLORIDA. HE TOLD ME HE WOULD SEND OUT THIS DOCUMENT AND TO RETURN IT WITH THIS EXPLANATION AND MY CHECK FOR \$150.00.

THANK YOU,

BUD CROSBY

THE CROSBY GROUP