

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P00000030809
1. Entity Name
MR. Chips Computer Solutions, Inc.

FILED

01 DEC 11 PM 1:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
2003 Willesdon Dr. E
JACKSONVILLE FL 32246

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3636238 Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent
Kimberly A. Blankenship, Esq.
1300 MARSH LANDING PKWY #108
JACKSONVILLE BEH, FL 32250
7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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.
SIGNATURE DATE
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. (See criteria on back)
10. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
President/CEO Helen M. Bates 2003 Willesdon Dr. E Jacksonville FL 32246
Vice President Frank Luberecki 2003 Willesdon Dr. E Jacksonville FL 32246
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
100004733171-4
-12/19/01-01061-001
****158.75 ****158.75

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.

SIGNATURE: Helen M. Bates President/CEO 11/12/01 (904) 645-3357
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (11/00)



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KIMBERLY A. BLANKENSHIP, ESQ.

DEBORAH W. TAYLOR, ESQ.

RICK FAIRWEATHER, ESQ.

MARY BETH VAN DER ZEE, ESQ.

November 14, 2001

Division of Corporations
Annual Report/Reinstatement Section
P.O.B. 6327
Tallahassee FL 32314-6327

Re: Mr. Chips Computer Solutions, Inc.
Doc # P00000030809

Dear Clerk:

On behalf of my client, Helen Bates, I am asking your department to waive the reinstatement fee for Mr. Chips Computer Solutions, Inc. Ms. Bates has become a full time caretaker for her husband and business partner, Frank Luberecki, since March 10, 2001, when Mr. Luberecki suffered a massive heart attack and subsequent stroke. Mr. Luberecki serves as Vice President of the corporation. Mr. Luberecki has been hospitalized at both St. Lukes Hospital and currently at Tandem Healthcare in Jacksonville, Florida.

Because of the family crisis, some of the couple's business responsibilities have slipped through the cracks. The company also relocated and the annual report never reached my clients at their new address. We are asking your department to consider granting a hardship exemption to my client and waiving the reinstatement fee.

I have enclosed a 2001 Annual Report along with the \$150.00 fee. Please let us know if we can provide your office with any documentation or affidavits to support this appeal.

Very truly yours,

Tad A. Cliplef

Enclosures

cc: Helen Bates