FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Jun 28, 2001 8:00 am DOCUMENT # P00000044100 **Secretary of State** 1. Ectity Name 06-28-2001 90001 036 \*\*\*150.00 ALL THE RIGHT STUFF, INC. Principal Place of Business Mailing Adoress 4472 WHITE OAK CIR. 4472 WHITE OAK CIR. RUUTURU KISSIMMEE FL 34748 KISSIMMEE FL 34746 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Strite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zio Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -CHRISTIE. BARBARA A Street Address (P.O. Box Number is Not Acceptable) 4472 WHITE OAK CIR. KISSIMMEE FL 34746 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. SIGNATURE Signature, typed or printed name of registrated agont and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWING FEE IS \$150.00 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 MAY 1: 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Trais Celete TITLE Addition CHRISTIE, BARBARA A NAME NAME STREET ADDRESS 4472 WHITE OAK CIR. STREET ADDRESS City-St-ZP KISSIMMEE FL 34746 C077-S1-71P TITLE ☐ Dalete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS Criv-ST-ZiP CITY-ST-ZIP TITLE ☐ Defale TITLE TI Channe Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP Delete TITLE THE Change Addition MAYE STREET ACCRESS STREET ADDRESS CRY-ST-ZIE CITY-ST-ZIP TITLE 🔲 Deleje TITLE Addition HALLE NAME STREET ADDRESS STREET ADDRESS City-St- &P CITY-ST-ZIP 🗆 Deleta TITLE Change Addition MAME NAME STREET ADDRESS STREET ADDRESS CUTY-ST-21P OITY+35-212 13. I hereby certify that the information supplied with this filing dues not qualify for the exemption stated in Section 119.07(3)(i). Ficrida 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 it made under oath; that I am an officer or director of the comporation or the receiver or truster emporated to execute this yeport 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.

Barbara A. Chrishe, Pres.

## **All The Right Stuff**

Attachmen to phrow your your Among the Jack Circle Kissimmer Fl. 34746

email:info@alltherightstuff.com www.alltherightstuff.com

Phone 407-397-4037 Fax 407-397-4746

June 25, 2001

Dear Sirs,

Enclosed please find a copy of our report which was filed on March 30, 2001. On May 31, 2001 I spoke with Tyron in the re-instatement office to report that the our check (#2151) mailed with the original report had not cleared and requested that he check on the status of our report. He advised that there had been a backlog of reports and that he would check on it and let me know the status.

On June 18, 2001, after no response had been received from your office, I called again and spoke with Michelle who advised that we should send a copy of the report and a new check. She also noted that if our earlier check was found that we would be issued a credit for it.

Thank you for your attention in this matter.

Sincerely

Barbara A. Christie

President