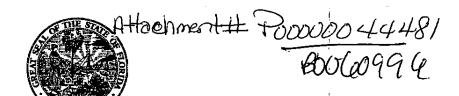
FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jul 31, 2001 8:00 am **Secretary of State** DOCUMENT # 06-25-2001 90252 043 \*\*\*158.75 07-31-2001 90008 005 \*\*\*391.25 EPOXISOFT CORPORATION. Principal Place of Business 3053 EGRET TER SAFETY YARBOR, FL 34695 3. Mailing Address
924 RIVERSIDE RIDGE RD 924 RIVERSIDE RIDGE RD Sulte, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3652792 City & State SPRINGS. City & State Applied For TARPON SPRINGS. Not Applicable 5. Certificate of Status Desired **X** 34689 6.\_Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NETTE STEPHEN T. CANNON STEPHEN T. CANNON 3053 EGRET TERRACE Street Address (P.O. Box Number is Not Acceptable) SAFETY HARBOR, FL 34695 924 RIVERSIDE RIDGE RO TARRON SPRINGS 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 A CONTROL OF THE PROPERTY OF T This corporation is eligible to satisfy its intangible. \$5.00 May Bo 19. Election Campaign Financing Tax filling requirement and electrito'do so. Trust Fund Contribution. Added to Fees (See criteria on back) OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDENT CANNON STEPHEN T. CANNON RD 924 PLYER SIDE RIDGE RD PRESIDENT. Change Addition TITLE ☐ Delete TITLE CANNON NAME STEPHEN' HALL 24 RIVERSIDE RIDGE PA STREET ADDRESS STREET ADDRESS Fr 34689 SPRINGS, FL 34689 CITY-57-28 CITY-\$1-29 TARPON SPRINGS TITLE Change Addition TITLE NAME MALES STREET ADDRESS STREET ADDRESS CTY-51-29 CITY-ST-ZP ☐ Addition ·me Delete MILE Change | NAME NAME STREET ADDRESS STREET ADCRESS CITY-\$1-79 CITY-ST-ZW ☐ Addition TITLE ☐ Chance TIME ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-212 CITY-ST-ZZP TITL S Addition TIFLE ☐ Delete ☐ Change NAME MALE STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TILE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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. 727.515. 62319 SIGNATURE:



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

June 27, 2001

**EPOXISOFT CORPORATION** 924 RIVERSIDE RIDGE RD **TARPON SPRINGS, FL 34689** 

	Subject: EPOXISOFT CORPORATION
=	Reference P0000044481 Number:
	Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report has not been filed and a copy is being returned for the following correction(s):
	The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.
	There is a balance due of \$391.25

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

ANNUAL REPORTS SECTION