FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

FILED Jul 04, 2002 8:00 am **Secretary of State**

05-21-2002 91191 002 ***150.00

DOCUMENT # P 00000052694 1. Entity Name Sharon Paone, CPA, PA 96404 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 37 CAMELOT Ridge Dr 5ame Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State ✓ Applied For 79-3648366 Brandon Not Applicable ^{Zip}33<u>511</u> Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent Sharon-Peone DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 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. Signsors, typed or primed name of registered agent and title if applicable 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. Trust Fund Contribution. (See criteria on back) . 11. OFFICERS AND DIRECTORS TITLE President (12/01 Snaron Paone 37 camelot Ridge Dr NAME NAME STREET ADDRESS STREET ADDRESS 3R2E034B CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ... NAME ... NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE . IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP intr ... TITLE NAME . STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP. J. TITLE tme , NALIF NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP 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 on an attachment with an address, with all other like empowered. Sharon Paone 130/02