
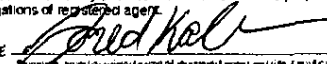
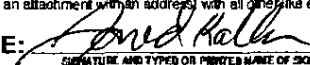


FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90053 044 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

| | | | |
|---|-----------------------------|---|--|
| DOCUMENT # P00000058552 | |  | |
| 1. Entity Name NETADVENTURES, INC. | | | |
| Principal Place of Business 4870 N CITATION DR. #106 DELRAY BEACH, FL 33445 US | | Mailing Address 4870 N CITATION DR. #106 DELRAY BEACH, FL 33445 US | |
| 2. Principal Place of Business 14550 Enclave Lakes Dr Suite, Apt. #, etc. 15 | | 3. Mailing Address 14545 J Military Trail Suite, Apt. #, etc. 105 | |
| City & State Delray Beach, FL | | City & State Delray Beach, FL | |
| Zip 33484 | | Zip 33484 | |
| Country USA | | Country USA | |
| 4. FEI Number 85-1015022 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | 6. Name and Address of Current Registered Agent KALLEN, JARED 4870 N CITATION DR. #106 DELRAY BEACH, FL 33445 | |
| 7. Name and Address of New Registered Agent Name: Jared Kallen Street Address (P.O. Box Number is Not Acceptable) 14550 Enclave Lakes Dr. T5 City: Delray Beach FL Zip Code: 33484 | | | |
| 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:  Jared Kallen President 5/7/03 (NOTE: Registered Agent's name required when registering.) | | | |
| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | |
| TITLE | P | <input type="checkbox"/> Delete | |
| NAME | KALLEN, JARED | | |
| STREET ADDRESS | 4870 N CITATION DR. #106 | | |
| CITY-STATE-ZIP | DELRAY BEACH, FL 33445 | | |
| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | | |
| TITLE | P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | Jared Kallen | | |
| STREET ADDRESS | 14545 J Military Trail #105 | | |
| CITY-STATE-ZIP | Delray Beach, FL 33484 | | |
| 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 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 10 or Block 11 if changed, or on an attachment with an address with all other the empowered. | | | |
| SIGNATURE:  Jared Kallen | | 5/1/03 561-702-681 | |

Attachment
Netadventures Inc. 90133757
14545 J Military Trail #105
Delray Beach, FL 33484
561-702-6181

May 9, 2003

Florida Department Of State

To Whom It May Concern:

Please find enclosed the UBR for my company Netadventures, Inc.
(Document #: P00000058552) along with a check for \$150 for the filling
fee.

I spoke with one of your representatives and was advised to write this
letter in regards to my late filling. Unfortunately, I never received the
UBR and did not file before May 1. I did recently move but all my mail
was being forwarded to my new address.

My company is very small and I can not afford to pay the \$400 late fee.
Please forgive my lateness in this matter.

If you must charge the late fee than I will have no choice but to dissolve
the corporation. If you must impose the late fee than please return my
\$150 check that I have remitted.

Thank you,


President
Jared Kallen
Netadventures Inc.