FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jun 11, 2002 8:00 am Secretary of State

CITY ST 209 TITLE MAME STREET ADDRESS CITY ST 209 TITLE MAME STREET ADDRESS CITY ST 209 TITLE MAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	DOCL	IMENT#				06-1	.1-2002 903	398 022 ***1:	50.00
CONTROL WRITE IN THIS SPACE 1 PROPRIES TO SOUTH AND THIS SPACE 2 PROPRIES SOUTH AND THIS SPACE 2 PROPRIES TO SOUTH AND THIS SPACE 3 PR	1. Entity Na	ame Y 00000	OKYNO	,					
DOINOT WRITE INITHIS SPACE 1 Procept free of Busines 1 And 1 AC Soft And I AC	C	tormuise C	mande	Tuc					
Environmental Process of Success Light A Substantial Process of Success Substantial Process of Substantial Proces	0	101011140130 C	Chapto,	エバし		_			
Environmental Process of Success Light A Substantial Process of Success Substantial Process of Substantial Proces									
See, Apr. J. etc. See, Apr. J.	0	PONOFWRITE	IN THIS S	PACE:			er invisión		
SURC AP 1, 1900. SURC AP 1, 1900. Cory & State. Cry & State. County 301666 County 3	2. Principal	Place of Business	3. Maiing Address			8012	5029		
Cry & Suits County County County Management for the purpose of Changing is inglished of Management of the purpose of Changing is inglished of Management of the purpose of Changing is inglished of Management of the purpose of Changing is inglished of Management of the purpose of Changing is inglished of Management of the purpose of Changing is inglished of Management of the purpose of Changing is inglished of Management of the State of Fourth Indiana. A. The above immediately supposed in State of Changing is inglished of Management of the purpose of Changing is inglished of Management of the State of Fourth Indiana. A. The object is satisfy in transposed for a bid in the State of Fourth Indiana. County of Management of	4743	DW 72 AUGNUE	4743 pw	12 Au	ENE.		•		
Covery County	Suite, Ap	x. f, etc.	Suite, Apt. #, etc.				TE IN THIS SPAC	CE .	
Sign Access pro. Set International Status Dealer of Dealer of Status Dealer of Dealer of Status Dealer of Dealer	1 () (City & State			4. FEI Number		Applied For	7
T. Herrie and Anthres of Current Inspiratorial Agent PONOTWRITE	Zío	Country	Zip T(-			희
IN THIS SPACE IN THIS SPACE Start Appears for the purpose of classing its registered office or registered agen, or both, in the State of Forkits SCALIFE The above named entity subtres fig. supposed of the purpose of classing its registered office or registered agen, or both, in the State of Forkits SCALIFE The above named entity subtres fig. supposed of the purpose of classing its registered office or registered agen, or both, in the State of Forkits SCALIFE The above named entity subtres fig. supposed of the purpose of classing its registered office or registered agen, or both, in the State of Forkits SCALIFE The above named entity subtres fig. supposed of the purpose of classing its registered office or registered agen, or both, in the State of Forkits SCALIFE The above named entity subtres fig. supposed of the purpose of classing its registered office or registered agen, or both, in the State of Forkits SCALIFE SCALIFE The above named entity subtres fig. supposed of the State of Forkits The above named entity subtres fig. supposed of the State of Forkits The above named entity subtres fig. supposed of the State of Forkits The above named entity subtres fig. supposed of the State of Forkits The above named entity subtres fig. supposed in the State of Forkits The above named entity subtres fig. supposed in the State of Forkits The above named entity subtres fig. supposed in the State of Forkits The above named entity subtres fig. supposed in the State of Forkits The above named entity subtres fig. supposed in the supposed in the state of Forkits The above named entity subtres fig. supposed in the state of Forkits The above named entity subtres fig. supposed fig. suppose	3316	6 USA	33166	U.S.A.			Fee!	Required	_[
IN THIS SPACE IN THIS SPACE IN the above named entry subpris fig. segment for the purpose of classifing its registered office or registered agent, or both, in the State of Forcias, and the State of	2			Nam	<u>ا</u> جن عضمت e	Name and Address of Current		unt]
IN THIS SPACE A. The above named early suiteds find bulgenest for the purpose of classinging its registered office or registered agent, or both. In the State of Forcias SIGNATURE A. The follows reporter predict and an arrangement of the purpose of classinging its registered office or registered agent, or both. In the State of Forcias A. Ther force principle in exhibits in subject to suit (appealance of the purpose of classinging its registered agent, or both. In the State of Forcias A. Ther force principle in exhibits in subject to suit (appealance of the purpose of classinging its registered agent, or both. In the State of Forcias A. Ther force principle in exhibits in subject to suit (appealance of the purpose of classinging its registered agent, or both. In the State of Forcias A. Ther force principle in exhibits in subject to subject to the purpose of classinging its registered agent, or both. In the State of Forcias A. Ther force principle in exhibits in the state of Forcias A. Ther force principle in exhibits in the state of Forcias A. Ther force principle in exhibits in the state of Forcias A. Ther force principle in the state of Forcias	1	;;;; DO*NOT : WI	RITE			O. Box Number is Not Acceptable			=
B. The above named entity subgrids fing waterment for the purpose of changing its registered office or registered agent, or both, in the State of Fording SCHATURE B. Thirfromposition is eligible to satisfy its strangible A. Thirfromposition is strangible A. Thirfromposition is eligible to satisfy its strangible A. Thirfromposition True Final Commitment is strangible A. Thirfromposition True Final Commitment is strangible A. Election Companying Fancing True Final Commitment is strangible A. Election Companying Fancing True Final Commitment is strangible True Final C		IN THIS SP	ACE		154 43	DW-VE-TO A	beet		4
The above named entity subpris fig bagement for the purpose of changing its registered office or registered agent, or both, in the State of Foricing SCHATURE A. The Store of Foricing Trust Fund Combination A. The Store of Foricing Trust Fund Combination A. The Store of Foricing Trust Fund Combination Trust Fund Combination A. The Store of Foricing Trust Fund Combination Tr				CIV.		The second secon	т		4
SCHAIUSE 8. THE Corporation is excitate to supply production (appeals) After 1 May 1 Fig. 15 3150.00 After 2 May 1 May 1 Fig. 15 3150.00 After 2 May 1 M	A The show	Partition to the Partition of the Partit	RADINE DANS	プノの影響を	(Time			33,166	_
### COTE Required for Lymnia specified to the figuration of the Companion		C House Certainy Supports (Als States Heal FOR	me purpose or crianging its	registered office	e or registere	d agent, or both, in the State of Fig.	riday /		
a. The Corporation is eligible to satisfy its intangible Tax lifting requirement and elects to do so. After May 1, Fee is \$55.00 After May 1, Fee is	SIGNATURE		d site (docacable OsOTE	210	3616	6	14/0	<u>d. </u>	1
Tax lifty requirement and elects to do so. Secretists on back) Secretists on back	9. This corp					7	DATE	·	┨
THE DATE CANTON STRET ADDRESS CITY-ST-JB THE MAKE	gnilil xaT	requirement and elects to do so.	After May Amended	1, Fee is \$550. I UBR is \$61,2	.00 .5	10. Election Campaign Fin. Trust Fund Committee		\$5.00 May Be	
THE MAKE STREET ADDRESS CITY ST. 29 THE MAKE ST							erecser med et a]
TITLE TI				TITLE TO THE	S CC TO				8
TITLE TI	STREET ADDRESS 4743 DW 72AUEDUE			E (10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					2
TITLE TI		Micimi, FL. 3316	6	Table Care Care Care Care	1865				8
TITLE TI	•			D 10 11 11 11 11 11 11 11 11 11 11 11 11			160		22
TITLE STREET ADDRESS CITY-ST- DP STREET ADDRESS CITY-ST-				70 2 5 Sec. 27 103			1704.4-7.7		
STREET ADDRESS CITY-ST-2P TITLE MAKE STREET ADDRESS CITY-ST-2P TITLE			·	AND THE PROPERTY OF THE PARTY.					1
CITY ST 29 INTEL INTE				NAME					
INTHIS SPACE STRET ADDRESS CITY ST IP TITLE MARE STRET ADDRESS CITY ST IP TITLE TITL		<u></u>	•	Action to the second		DO NOTA	NRITE		
STRET ADDRESS CITY ST 2P ITTL MAKE STRET ADDRESS CITY ST 2P CIT		The state of the s		mu a		NWA I PANER LA PARENTE DE LA PRINCIPA DEL PRINCIPA DEL PRINCIPA DE LA PRINCIPA DE			200
ITILE MAKE STREET ADDRESS CITY ST JP ITILE MAKE STREET ADDRESS CITY ST JP 13. I hereby Certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 amorphism 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 ampowered. SIGNATURE: OA/29/03 30559737997	STREET ADDRESS			STREET ADDRESS					}
MAKE STREET ADDRESS CITY-ST-IP TITLE MAKE STREET ADDRESS CITY-ST-IP TITLE MAKE STREET ADDRESS CITY-ST-IP TOTY ST-IP TOTY S	CIY-ST-ZP			Chest Constitution	1000				1
STRET ADDRESS CITY ST 29 ITTLE MAKE STRET ADDRESS CITY ST 29 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 preport 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 possible empowered to execute this report as required by Chapter 807. Florida Statutes; and that my name appears in Block 11 or on an SIGNATURE: SIGNATURE: OA/29/03 3055973797	HAME			SPECIAL PROPERTY.					
ITILE MAME STREET ADDRESS CITY ST-TP 13. I hereby certify that the information supplied with this lifting does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes: I further certify that the information of the corporation or the receiver or typic empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 11 or on an attractment with an address, with all-other life-ampowered. SIGNATURE: OA/29/03 3055973393	STREET ADORESS CITY-ST-ZIP		•	The State of the S			Por the t		
STREET ADDRESS CITY ST-TP 13. I hereby certify that the information supplied with this fitting does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes: I further certify that the information indicated on this report or supplemental report is true and occurate 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 typic empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attackment with an address, with all-other like-empowered. SIGNATURE: OA/19/03 3055973797	TTLE		<u> </u>	See water Supplement	A STATE	CONTRACTOR OF STREET			
13. I hereby certify that the information supplied with this fitting does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida Statutes: I further certify that the information indicated on this report or supplemental report is true and occurate 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attractment with an address, with all other like empowered. SIGNATURE: OA/19/03 3055973797	NAME Street acoress			20 TO 1 TO 1 TO 1			第37 555		
of the corporation of the receiver or trastic empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an SIGNATURE: SIGNATURE: O4/79/03 305597-7997	C74-21-34			YOTY-SI-20-55					
SIGNATURE: Comilo Diaz 04/29/02 305977797	13. I hereby co	ertify that the information supplied with this on this report or supplemental report is tru	s liting does not quality for it e and accurate and that my	he exemption sta signature shall i	ated in Section	on 119.07(3)(i), Florida Statutes, i fu ne legal effect as if made under ou	rther certify that	the information	
	attachmen	parausm or the receiver or trastee empow it with an address, with all other like empo	ered to execute this report a wered.	as required by C	Chapter 607,	Florida Statules; and that my name	appears in Blo	ck 11 or on an	
	SIGNAT		(a)	milo'	DIA	= pulpolas	20550	בפרבי	
			PED JUNEE OF BIGHENG OFFICER OF	окестоя	1	Con Took	Daytime Pric	Stag ?	



Attachment B0125029

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

May 22, 2002

STORMWISE CONCEPTS, INC. 4743 NW 72 AVENUE MIAMI, FL 33166

Subject: STORMWISE CONCEPTS, INC.

Reference Number: P00000064748

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

The new registered agent must sign accepting the designation.

Please note the money amounts differ on the check. The numeric and written amounts must be the same. Please send a corrected check for the proper amount.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

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

/ns ANNUAL REPORTS SECTION