FOR PROFIT CORPORAT	TION ZOOS RW W
DOCUMENT # P 0000068907	FILED
Edmond R. KanCourt, P	4 05 HOV 14 AM 10: 0?
DO NOT WRITE IN THIS :	THE MEDICAL OF SIGNA
2. Principal Place of Eusinest And We 3. Mailing Address Suite, Apt. A. etc.  Suite, Apt. A. etc.  Suite, Apt. A. etc.	Age LOOD AVE  DO NOT WRITE IN THIS SPACE
Organit Dange Fe sittle	Hill FL 4. Estylumbor 6 59179 Applied For
232127 collins A 232117	Country 5. Certificate of Status Desired \$8.75 Additional Fee Required
DO NOT WRITE	7. Name and Address of Current Registered Agent .
IN THIS SPACE	Street Address Box Number is the Asceptable of Aul
The above named entity submits this statement for the purpose of changing the obligations of registered agent.	its registered office of registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Sometive Novel or relinted company of markland	108 Loguidus 10/30/05
January 1 - May 1 Fee is \$150.00 After May 1 - Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
IME D Ran Court Edmond	
GIR-SI-ZIP DOLF Trange F1 32/27	STRETAGOESS)
utile uable street address city-st-zip	OFFICE STATE OF THE STATE OF TH
AMME SPREET ACCRESS STREET ACCRESS STREET ACCRESS	INTERPRETABLIES STRETABLIES CITY, STATE  DO NOT WRITE
TILE JAME TREEL ADDRESS TYY-ST-ZIP	IN THIS SPACE
MLE AME THEET ADDRESS TY- ST- ZIP	TOLE  ARMIE STREET ADDRESS  CUTY ST. ZIP
TILE AME TREET ADDRESS UY-ST-7PP	IDIE IAME SIRETADIPESS LUIT ST. PE
<ol><li>I hereby certify that the information supplied with this filling does not qualify for indicated on this report or supplemental report is true and accurate and that in of the corporation or the receiver or trustee empowered to execute this repor- attachment with an address, with all other like empowered.</li></ol>	the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ty signature shall have the same legal effect as if made under eath; that I am an officer or director t as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an

SIGNATURE: \_

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Florida Department of State

Attn: (UBR 2005)

POBox 6327

Tallahassee, FL 32314-6327

October 30, 2005

Dear Sir or Madam:

As per our conversation 10/30/05 with your office, this letter is to inform your office that

We never received report for the 2005 uniform business report. We sent in a letter changing our

mailing address when the office moved. Our office spoke with a

supervisor this person advised me to let your office know of the correct address.

Your office also said all penalty fees would be waved due to the problems our company had with the

mailing address.

Furthermore, we got a letter saying the late fee was not waved; the Division of Corporations advised

me to send this letter and all late fees would be waved as on the Internet filing just mark the

box saying the original form was never received and we never did get form and we and until

September 1, 2005.

Please make the Correct changes to my records and file my corporation UBR from for 2005.

Thank you for your time in concerning this matter.

Edmond R. Rancourt, PA 823 Dunlawton Ave Ste A

Port Orange FL 32127