

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

		( /			
DOCUMENT # P000000		FILED 05 JUL 22 PH 1: 26			
1. Entity Name  COLON THERAPY CLINIC					
		SECRETAR	AAE		
DO NOT MOT	E INI TIUO	204.05	SECRETARIO TALLAHASAII	E, FLOIDA	
DO NOT WRIT	E IN THIS	SPACE	100		
Principal Place of Business     2831 RINGLING BOULEVARD	3. Mailing Address Same				
Suite, Apt. #, etc. SUITE 213			DO NOT WRITE IN THIS SPACE		
Ony & State City & State SARASOTA, FL			4. FEI Number 651027816	Applied For Not Applicable	
Zip Country 34237 USA	Zip	Country	5. Cartificate of Status Desired	\$8.75 Additional Fee Required	
		Name	7. Name and Address of Current Registe	red Agent	
DO NOT WRITE IN THIS SPACE			SPIEGEL & UTRERA, P.A.		
		Street Address	Street Address (P.O. Box Number is Not Acceptable)		
			1840 Southwest 22 Street, 4th Floor		
		<sup>City</sup> Miami	Gity Miami FL Zip Code 33145 ared office or registered agent, or both, in the State of Florida. Lam familiar with, and accept		
SIGNATURE  By:  Signature yard of the prace of repartment of the prace		Natalia Utrera, Vice		\$5.00 May Be Added to Fees	
TITLE	ND DIRECTORS	TITLE		<del></del>	
Menard, Alain M. PSTD 2831 Ringling BLVD, ste 213		NAME			
Sarasota, FL 34237	210	STREET ADDRESS CITY-ST-ZIP			
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TITLE		TITLE			
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STREET ADDRESS CITY-SI-ZIP		CITY-ST-ZIP			
Inereby certify that the information supplied indicated on this report or supplemental report if the corporation or the receiver or trustee attachment with an address, with all other like.	with this filling does not qua ort is true and accurate and empowered to be cute this a empowered.	lify for the exemption stated in that my signature shall have the report as required by Chapter	Section 119.07(3)(i), Florida Statutes. I further e same legal effect as if made under oath, tha 607, Florida Statutes; and that my name app	certify that the information at I am an officer or director lears in Block 10 or on an	

Jen Burnett

SIGNATURE AND TYPED OR PUNTED HAME OF SIGNING OFFICER OR DIRECTOR.

HT. BWnctle

Virginia Ann-Burnette
MY COMMISSION # DØ2340/4 EXPIRES) . 941-922-77
AUGUST 30, 2007 Date
BONDED THRU TROY FAIN INSURANCE, INC.

## Spregel & Utrera, P.A.

Counselors & Attorneys at Law

KEVORK ADANAS'
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Licensed in Florida and Registered as a Foreign

Licensed in Florida and Registered as a Foreign Lawyer in England and Wales Licensed in Florida & Qualified Solicitor in England and Wales

## SENIOR PARALEGALS

GRACIELA BATTAGLIA IRMA C. MAROUEZ

GINGER LAFORESTRIED

CLAUDIA MERINO

July 11, 2005

State of Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

RE: Waiver of Annual Report late fee for COLON THERAPY CLINIC, INC., a Florid Corporation; Document Number P00000070051.

Dear Sir or Madam:

Please be advised that Spiegel & Utrera, P.A., (hereinafter the "Firm") is general counsel for the above-captioned company (hereinafter the "Company"). The Company failed to file its Uniform Business Report or pay the Uniform Business Report filing fee within the time prescribed by Florida Statutes Chapter 607 because the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Company. Therefore, please allow this correspondence to serve as a request that the Florida Department of State Division of Corporations waive the late fee for the Company upon the filing by the Company of its Uniform Business Report and payment of the filing fee for same, which are presented contemporaneously with this request.

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For the Firm

Enclosures:

- 1. UBR
- 2. Filing fee