2001 UNIFORM BUSINESS REPORT (UBR)

Jul 10, 2001 8:00 am Secretary of State P00000074736 DOCUMENT # 1. Entity Name A-PLUS PROTECTION, INC. 07-10-2001 90110 014 ***150.00 Principal Place of Business Mailing Address 3200 NE 14TH STREET 3200 NE 14TH STREET POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1031880 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HEPP, CURT Street Address (P.O. Box Number is Not Acceptable) 3200 NE 14TH STREET POMPANO BEACH FL 33062 City 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 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. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ☐ Change Addition ZAKATOV, SERGEY NAME NAME STREET ADDRESS 3200 NE 14TH STREET STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

REQSERGEY ZAKATOV, PRESIDENT

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

7/3/01

Daytime Phone #

A-PLUS PROTECTION, INC. 3200 NE 14TH STREET POMPANO BEACH, FL 33062

July 3, 2001

Division of Corporations

Annual Reports Section

PO Box 1500

Tallahassee, FL 32302-1500

Re: A-Plus Protection, Inc. EIN 65-1031880

To Whom It May Concern:

Please accept this letter as my sworn testimony that as of this date and writing, the attached 2001 Annual Report was received by me Monday, July 2, 2001 and is the only mailing I received from your office.

Please find enclosed the completed Uniform Business Report (UBR) with my check in the amount of \$150.00 as payment for the 2001 filing fee.

Thank you for your assistance and prompt attention to this matter.

Very truly yours,

Sergey Zakatov, President

Enclosures