FILED **2002 UNIFORM BUSINESS REPORT (UBR)** Jul 08, 2002 8:00 am Secretary of State P00000076122 **DOCUMENT#** 1. Entity Name 07-08-2002 90235 040 ***150.00 THE EQUALIZERS, INC. Principal Place of Business Mailing Address 2202 CURRY FORD RD. SUITE B 2202 CURRY FORD RD. SUITE B ORLANDO FL 32806 ORLANDO FL 32806 2. Principal Place of Business 2312 Winter 3. Mailing Address 12. 2312 Winter Woods Blad. Woods Blud. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3686405 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agen **CURTIS, ARTHUR T** Street Addres's (P.O. Box Number is Not Acceptable) 2202 CURRY FORD RD, SUITE B ORLANDO FL 32806 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE 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 **\$5.00** May Be 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition ☐ Change TITLE ☐ Delete TITLE **CURTIS, ARTHUR T** NAME NAME 2912 KINNON DR STREET ADDRESS STREET ADDRESS ORLANDO FL 32817 CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition TITLE □ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 exploit 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.

Date

Daytime Phone #

SIGNATURE:

The Equalizers, Inc. pooloo76122

July 3, 2002

State of Florida
Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I have enclosed the completed Uniform Business Report (UBR) for The Equalizers, Inc.

Unfortunately, I never received the original form for filing due to a wrong address. When I checked our status on Sunbiz.org, and I saw that my form had not been filed.

I am asking that you please accept my form and check for \$150.00 and forgive the penalty of \$550.00.

I thank you for any consideration you may give me.

Sincerely,

Arthur T. Curtis

President

(407) 657-7790 Fax: (407) 657-5448

2312 Winter Woods Blvd. Winter Park, FL 32792