

FOR PROFIT CORPORATION - 2001-2002
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P 000000 81518**
 1. Entity Name
RES Consulting Services, Inc.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

02 OCT -3 PM 12:01

DO NOT WRITE IN THIS SPACE

300008305023--4
 -10/10/02--01035--026
 ***300.00 ***300.00

2. Principal Place of Business
4678 NW 99 Ter
 Suite, Apt. #, etc.
 City & State
Surprise FL
 Zip
33351 Country

3. Mailing Address
1900 Corporate Blvd
 Suite, Apt. #, etc.
400 EAST
 City & State
BOCA RATON FL
 Zip
33431 Country

DO NOT WRITE IN THIS SPACE

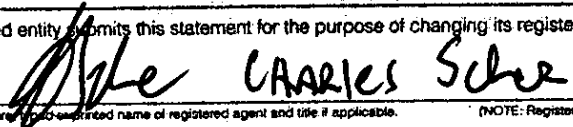
DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1036678

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent
 Name **CHARLES Scher**
 Street Address (P.O. Box Number is Not Acceptable)
1900 Corporate Blvd # 400 EAST
 City **BOCA RATON** FL Zip Code **33431**

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  **CHARLES Scher** DATE **8-23-02**
(Signature of registered agent and title if applicable. (NOTE: Registered Agent signature required if not changing))

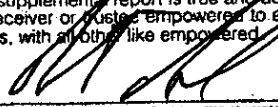
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT Robert E SANDA 4678 NW 99 Ter Surprise FL 33351	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. Sonia L. Shields 4678 NW 99 Ter Surprise FL 33351	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **8-23-02** Daytime Phone # **561-9886838**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RES Consulting Services, Inc.

4678 NW 99th Terrace
Sunrise, FL 33351

August 23, 2002

The Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

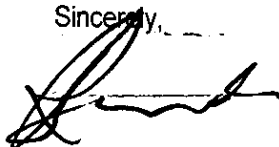
Dear Sir:

Re: RES Consulting Services, Inc. P 00000081518

The registered agent for the above corporation changed his address in January 2001. He advised the post office of the change. However, he never received the first or the second reminder to file the annual report for the corporation. As a result we never filed this report until our new accountant asked us if the fee has been paid. We would appreciate it if you would accept the check for \$300.00 for the 2001 and 2002 years and abate the penalty.

We apologize for any inconvenience caused.

Sincerely,



Robert E. Sanda
President