## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

954-723-9430

| DOCUMENT # P 00000084432   |   |                                       |   |   |   |           | FIL                       | E 1      | <b>)</b> |                          |                             |
|--|---|---------------------------------------|---|---|---|-----------|---------------------------|----------|----------|--------------------------|-----------------------------|
| JC FINAL TOUCH, INC.   |   |                                       |   |   |   | 02        | JUN 2                     |          |          | : 49                     |                             |
| DO NOT WRITE IN THIS SPACE   |   |                                       |   |   | SECRETARY OF STATE<br>FALLAHASSEE, FLORIDA            |           |                           |          |          |                          |                             |
| 2. Principal Place of Business 700 BRIALWOOD TERR  | 3. Mailing Address 700 BPIAP  | 3. Mailing Address 700 BRIARWOOD TELL |   |   |   |           |                           |          |          |                          |                             |
| Suite, Apt. #, etc.  OAVIC  FL   | Suite, Apt. #, etc.   | Apt. #, etc. FL                       |   |   | . DO NOT WRITE IN THIS SPACE                          |           |                           |          |          |                          |                             |
| City & State   | City & State  |                                       |   |   | 4. FEI Numbe  | 103       | 7098                      | , .      |          |                          | lied For<br>Applicable      |
| 33325 Country S.A.   | 33325   | Court                                 | ŠΑ                                      |   | 5. Certificate  | of Status | Desired                   |          | Fe       | 3.75 Addit<br>e Required | <del></del>                 |
| <u> سند ماؤه چمپر</u> ه پر پرهینهای در مورود در بازد کارد کارد کارد در بازد کارد کارد کارد کارد کارد کارد کارد کار                                      |   | -                                     | Name                                    | JULIC   | Name and A  | ddress (  |                           | Registe  | red A    | gent                     |                             |
| DO NOT WRITE<br>IN THIS SPACE  |   |                                       |   | Address (P.O. Box Number is Not Acceptable)  BEIAE WOO'I)  TELE |   |           |                           |          |          |                          |                             |
|  |   |                                       | _                                       | AUIC  |   |           |                           | F        | L        | Zin Code                 | 325.                        |
| 8. The above named entity submits this statement for   | or the purpose of changing its  | registere                             | d office or                             | registered  | d agent, or bot                                       | h, in the | State of Flo              | orida.   |          |                          |                             |
| SIGNATURE JULIO C No.  |   | UL/O<br>E: Registered                 | N<br> ∧gent signatu                     | UNE (   |   |           | <u>O</u>                  | 5-2      | O -      | 02                       |                             |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)   | January 1 - M<br>After May<br>Amende<br>Make Check Payal  | 1, Fee is<br>d UBR is                 | \$550.00<br>\$61.25                     |   |   |           | npaign Fir<br>Contributio |          |          | \$5.00<br>Added to       | May Be                      |
| 11. OFFICERS AND  TITLE PRESIDENT D  | DIRECTORS   | TITLE                                 | - · - · · · · · · · · · · · · · · · · · | 0.5.1   | 2   | 0.0       |                           |          |          |                          |                             |
| NAME STREET ADDRESS TOO BELARWOOD TELE ONLY-SI-JIP DAVIE FL 33325  |   |                                       | T ADDRESS<br>ST+ZIP                     |   | 0.00 ARARTS (62)<br>8.75-ARSUPP                       |           |                           |          |          |                          |                             |
| TILE DAVIC TC 35325  TILE DAVIC TC 35325  TREET ADDRESS TOD BRIARWOOD TERR TTY-ST-ZIP DAVIC FC 33325   |   |                                       | T ADDRESS<br>ST-ZIP                     | 88  | -06/12/0201065011                                     |           |                           |          |          |                          |                             |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   | STREE                                 | TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | DO  | N C       | ***<br>OT                 | _        |          |                          | <del>300,0</del> 0          |
| TITLE NAME STREET ADDRESS  |   | TITLE<br>NAME<br>STREE<br>CITY-5      | T ADDRESS<br>ST - ZIP                   |   | IN  | Tŀ        | IIS S                     | SPA      | CI       |                          |                             |
| TIT).E<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | TITLE<br>NAME<br>STREET<br>CITY-S     | I ADDRESS<br>ST - ZIP                   |   |   |           |                           |          |          |                          |                             |
| TITLE NAME STREET ADDRESS CTTY-ST-ZIP  |   | CiTY+S                                |   |   |   |           |                           |          |          | A                        |                             |
| 13. I hereby certify that the information supplied with<br>indicated on this report or supplemental report is<br>of the corporation or the receiver or trustee emp<br>attachment with an address, with all other like em | this filing does not qualify for true and accurate and that nowered to execute this reporpowered. | t as requi                            | red by Cha                              | ipiei 001,  | on 119.07(3)(i)<br>ne legal effect<br>Florida Statute | :s, and ( | iai niy nar               | ne appea | ars in   | BIOCK II OF              | mation<br>director<br>on an |

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

May 20, 2002

Att: Reinstatement Division of Corporations P.O. Box 6327 Tallahassee FL 32314

Re: Julio Nunez/ JC Final Touch Inc.

To Whom It May Concern,

Due to a change of address to 700 Briarwood Terrace, Davie Fl. 33325, I was not able to recieve your anual letter. For the reason I was not able to made my annual payment of \$150.00.

I do apologized for all the inconvenience I have maded, please enclosed find a money order for the amount of \$150.00 to cover my anual due.

Thank you very much for all your help in this matter.

Sincerely,

Julio Nunez President