2001 UNIFORM BUSINESS REPORT (UBR)								FILE	D			
DOCUMENT # P0000086270  1. Entity Name MY HANDYMAN, INC.							Aug 29, 2001 08:00 AM Secretary of State					
Principal Plac		<u> </u>	Mailing Address									
DEERFIELD B 33442	BEACH	FL	DEERFIELD BEACH 33442		FL							
300 NE ELLE			3. Mailing Address 300 NEELLER ST.									
Suite, Apt.			Suite, Apt. #, etc.		•			DO NOT WRI	TE IN THIS S	SPACE	_ 	
City & State	BEA CH	FL	City & State DEE RFIELD BEACH	. <u></u>	FL			Number 1125388		<b>─</b>	oplied For ot Applicable	
Zip 33441		country	Zìp 33441	Coun	ntry		<b>5.</b> Ce	rtificate of Status Desired		\$8.75 Adı Fee Require		
	6. Name and	Address of Current R	egistered Agent				7. Na:	me and Address of New R	egistered A	gent		٦
BARRIE MARK R 4184 NW 6TH CT					Name BARRIE Street A 300 N		ARK O. Box ST.	R Number is Not Acceptable	)			
DEERFIELI 33442	D BEACH	FL			City					Zip Cod	e	-
<del> </del>					DEE	RFIELD BE	EACH		FL	3344		
SIGNATURE	MARK I	R. BARRIE	the purpose of changing its		ed office or	-		-	08/29/	<u> 2001 </u>	<u></u>	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)    X   FILE NOW!!!   After MAY 1, 2001   Make Check Payable					will be \$5	550.00		10. Election Campaign Fir Trust Fund Contribution			<b>0</b> May Be i to Fees	
11.		OFFICERS AND D	IRECTORS	12.			ADDI	TIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete			V BARRIE 300 NE I DEE RFII	ELLER	JAMES S R ST. EA CH, FL 33441		☐ Change	<b>☒</b> Addition	034 (11/
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BARRIE 4184 NW 6TH DEERFIELD F		☐ Delete .		-	DST BARRIE 300 NE I DEE RFI	ELLER	BARBARA M R ST. EA CH, FL 33441		<b>™</b> Change	Addition	CR2E
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BARRIE 4184 NW 6TH DEERFIELD E		☐ Delete		_	DP BARRIE 300 NE I DEE RFI	ELLER	MARK R R ST. EA CH, FL 33441		X Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	☐ Delete							Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		•					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	CITY	ie Eet address '-st-zip					☐ Change	Addition	
of the cor changed,	poration or the re	supplemental report is to ceiver or trustee empownent with an address, with	his filing does not qualify for rue and accurate and that n vered to execute this report th all other like empowered.	เบ รเกกล	fiire chail h	iava tha cai	ma iac	ral attact as it made under a	antha that I a	m na officer	or director	
SIGNAT	URE: _M	ark R. Barrie IGNATURE AND TYPED OR PRI	NTED NAME OF SIGNING OFFICER (	OR DIRECT	TOR		DP	08/29/2001 Date	Da	ytime Phone #		-