

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90126 009 ***150.00

DOCUMENT # P00000088826**1. Entity Name**
SPORTOWELS.COM, INC.**Principal Place of Business**
1875 BUCCANEER CIRCLE
SARASOTA FL 34231**Mailing Address**
1875 BUCCANEER CIRCLE
SARASOTA FL 34231

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1044885

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****WELCH, JEFFREY J**
1875 BUCCANEER CIRCLE
SARASOTA FL 34231

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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***Jeffrey J Welch President*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$550.00**
After September 13, 2002 Fee will be \$750.00
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****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PSD	WELCH, JEFFREY J	1875 BUCCANEER CIRCLE	SARASOTA FL 34231	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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CR2E034 (4/02)

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.**SIGNATURE:****SIGNATURE** *Jeffrey J Welch*

9/7/02

941-539-3524

September 9, 2002

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

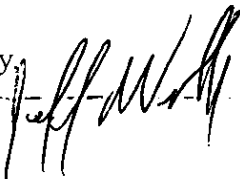
RE: Uniform Business Report Filing

To Whom It May Concern:

My corporation has temporally suspended business operations but I would like to keep it from being dissolved. Using the current mailing address has caused additional problems that I will have to address once operations are resumed. We are missing substantial correspondence from the beginning of 2001 including several bank statements. I never received any initial notice of this filing if it was sent. In fact the current one was damaged by weather when it was not properly placed in the mailbox.

Due to this situation, I am requesting that you waive the late fee and I am enclosing a check for the \$150 filing fee. Please call me if there are any additional requirements. Thank you for your attention to this matter.

Sincerely,



Jeff Welch
President and Secretary
Sportowels.com Inc.