

FILED  
Aug 15, 2001 8:00 am  
Secretary of State

08-15-2001 90005 042 \*\*\*150.00

2001 UNIFORM BUSINESS REPORT (UBR)

<b>DOCUMENT #</b> P00000097181	
<b>1. Entity Name</b> TERANCE GUSTAVE STUCCO INC	
<b>Principal Place of Business</b> 7226 W COLONIAL DR Suite, Apt. #, etc.	
<b>Mailing Address</b> 1801 E COLONIAL DR #107 ORLANDO, FL 32803	
<b>2. Principal Place of Business</b> 7226 W COLONIAL DR Suite, Apt. #, etc.	<b>3. Mailing Address</b> 1801 E COLONIAL DR Suite, Apt. #, etc. 107
<b>City &amp; State</b> ORLANDO, FL	<b>City &amp; State</b> ORLANDO, FL
<b>Zip</b> 32818	<b>Country</b> US
<b>Zip</b> 32803	<b>Country</b> US
<b>4. FEI Number</b> 59-3675479	
<b>Applied For</b> Not Applicable	
<b>5. Certificate of Status Desired</b> \$8.75 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b> TERRANCE GUSTAVE 1801 E COLONIAL DR ORLANDO, FL 32803	
<b>7. Name and Address of New Registered Agent</b> Name TERRANCE GUSTAVE Street Address (P.O. Box Number is Not Acceptable) 1801 E COLONIAL DR #107 City ORLANDO FL Zip Code 32803	
<b>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.</b>	
<b>SIGNATURE</b> ✓ <b>TERANCE GUSTAVE</b> <b>8/9/2001</b> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date	
<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> (See criteria on back)	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00.</b> <b>Make Check Payable to Department of State</b>
<b>10. Election Campaign Financing</b> Trust Fund Contribution. May Be Added to Fees <b>\$5.00</b>	
<b>11. OFFICERS AND DIRECTORS</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>PRESIDENT</b> TERANCE GUSTAVE 1801 E COLONIAL DR #107 ORLANDO, FL 32803
<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>Change</b> <b>Addition</b>
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<b>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.</b>	
<b>SIGNATURE:</b> ✓ <b>TERANCE GUSTAVE</b> <b>8/9/2001</b> <b>(407) 541-0705</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	

ADD81309

DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)

Attachment Doc# P000000097181 A0081309

Robinson Accounting

08/09/01

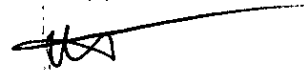
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

To Whom It May Concern,

~~This letter is to inform that Terrance Gustave inc has relocated. The named Corporation did~~  
not receive a Annual Corporate Report. Due to these circumstances we are asking that you  
abate the reinstatement fees.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,



Mr. Robinson  
Robinson Accounting