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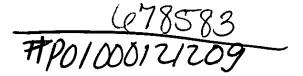
2002 UNIFORM BUSINESS REPORT (UBR)

Sep 30, 2002 8:00 am Secretary of State DOCUMENT # / P00000097382 1. Entity Name BEVERLEY NELSON CURTIS, M.D., P.A. 09-30-2002 90181 020 ***550.00 Principal Place of Business Mailing Address 4866 ROTHSCHILD DR 4866 ROTHSCHILD DR. CORAL SPRINGS FL 33067 CORAL, SPRINGS, FL: 33067. 2. Principal Place of Business NW Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 65-1059773 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CURTIS, BEVERLY N Street Address (P.O. Box Number is Not Acceptable) 4866 ROTHSCHILD DR. **CORAL SPRINGS FL 33067** City Zip Code 8. The above narged entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATUR Signature, typed/or printed ame of registered agent and title if applicable NOTE: Registered Agent signature required when reinstating) satisfy its Intangible 9. This corporation is eligible to FILE-NOW!!!-FEE IS \$150.00---10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/01) ☐ Addition NAME CURTIS, BEVERLEY N NAME STREET ADDRESS 4866 ROTHSCHILD DR. STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS FL 33067 CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ___ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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:

Affachment HIGGINBOTHAM & COMPANY

Certified Public Accountants



September 26, 2002

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee FL 32302-1500

Re: Gunter Furniture Inc

Dear Sir or Madam:

Please find enclosed the 2002 Uniform Business Report for the above referenced client. The corporation was set up at the end of 2001 but did not start business until January 1, 2002. The client did not they were required to file this form. Please waive the penalty for them. A check for \$150.00 is enclosed.

Thank you for your cooperation in this matter. Please contact me if you need additional information.

Very Truly Yours,

Andrew J. Higginbotham Certified Public Accountant

AJH/DH

Enclosures