FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jul 22, 2002 8:00 am P00000114610 DOCUMENT # Secrétary of State 1. Entity Name CERTIFIED ENTERPRISE ADMINISTRATORS, INC. 07-22-2002 90160 028 \*\*\*150 00 Principal Place of Business Mailing Address 17 BLACKHOUSE CT 17 BLACKHOUSE CT B0130722 ORMOND BEACH FL 32174 ORMOND BEACH FL 32174 2. Principal Place of Business 3. Mailing Address 17 Blockhouse Ct. Suite, Apt. #, etc. 7 Blockhouse Ct. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 59-3696701 Ormand Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MACHT, BRIAN Street Address (P.O. Box Number is Not Acceptable) 17 BLOCKHOUSE CT ORMOND BEACH FL 32174 City 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. SIGNATURE yped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete Change ☐ Addition MACHT, BRIAN Marshall, James 3447 Bareback, Trail NAME NAME 17 BLOCKHOUSE CT STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 Ormand Beach, Fl. 32174 CITY - ST- 7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

#617#80 0275h

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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SIGNATURES

AHallment 60130722

Certified Enterprise Administrators, Inc. 17 Blockhouse Ct. Ormond Beach, Fl. 32174

July 16, 2002

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl. 32302-1500

Dear Sir or Madam:

REF# P00000114610

There seems to have been a mistake on my 2002 Uniform Business Report letter, I did not receive the first mail out for this item. On the outside of the mail piece the address is incorrect as well as its listing inside for the "Principal Place of Business"-and-for-the-"Mailing Address". The strange part is that the address is listed correctly in box #6 for the "Name and Address of Current Registered Agent".

I called the phone number at the bottom (UBR) Instructions page and the company representative I spoke with told me inform you of this in a letter and include the original amount due of \$150.00. As you can tell by my company's records we are small and have not been in business very long, but we have never been late on the payments due. I have also corrected the misprint on the enclosed (UBR).

Sincerely,

Brian Macht President