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## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 13, 2001 8:00 am DOCUMENT # P00000115208 Secretary of State END2END COMMUNICATIONS, INC. 03-13-2001 90001 003 \*\*\*150.00 Principal Place of Business Mailing Address 444 DARLING DRIVE 444 DARLING DRIVE VENICE FL 34285 VENICE FL 34285 2. Principal Place of Business 3. Mailing Address 444 Darling DRIVE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Numbe Applied For enice 2 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 4285 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE D Delete TITLE ☐ Change ☐ Addition NAME STEPHENS, BRETT E NAME STREET ADDRESS STREET ADDRESS 444 DARLING DRIVE CITY-ST-ZIP VENICE FL 34285 CITY-ST-7IP TITLE Delete Change TITLE ☐ Addition NAME STEPHENS, KIMLISA A NAME STREET ADDRESS STREET ADDRESS 444 DARLING DRIVE CITY-ST-ZIP CITY-ST-7IP VENICE FL 34285 ☐ Delete TITLE TITLE TT1'Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete 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 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 regiver or visite 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 ampowered.

AME OF SIGNING OFFICER OR DIRECTOR





MARCH 7, 2001

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

To Whom It May Concern:

I was recently incorporated as End2End Communications, Inc. as of 2/8/2001. This was not incorporated prior to 12/31/00 and therefore would I like to request a refund of the fee collected last year. I have enclosed a copy of the official IRS notice, documenting the officially recognized date of incorporation.

Brett Stephens President

Sincerely

444 DARLING DRIVE VENICE, FLORIDA 34285 941.488.2577 bstephens@end2enddesign.com DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE ATLANTA GA 39901 DATE OF THIS NOTICE: 02-08-2001 NUMBER OF THIS NOTICE: CP 575 A EMPLOYER IDENTIFICATION NUMBER: 65-1071868 FORM: SS-4

Alloc 1716930775 B

FOR ASSISTANCE CALL US AT: 1-800-829-1040

END2END COMMUNICATIONS INC 444 DARLING DR VENICE FL 34285

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4; Application for Employer Identification Number (EIN). We assigned you EIN 65-1071868. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following forms(s) by the date we show.

Form 941 Form 1120 Form 940 04/30/2001 03/15/2002 01/31/2002

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a determination on your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.

If you're required to deposit for employment taxes (Forms 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within six weeks....You can use the enclosed coupons if you need to make a deposit before you receive your supply.