

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90392 001 ***150.00

DOCUMENT # **000000115798**

1. Entity Name

Income ALTERNATIVES Inc ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12502 SEATTLE SLON DR

3. Mailing Address

12502 SEATTLE SLON DR

Suite, Apt. #, etc.

2002

Suite, Apt. #, etc.

2002

City & State

Houston, TX

City & State

Houston, TX

Zip

77065

Country

USA

Zip

77065

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3685232

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Michael McRay

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

5821 BALDWIN AVE

City

PENSACOLA

FL

Zip Code

32507

**DO NOT WRITE
IN THIS SPACE**

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

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE **PRESIDENT**
NAME **John Conroy**
STREET ADDRESS **326 PELTON MEADOW DR**
CITY-ST-ZIP **BATON ROUGE, LA 70810**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V. PRESIDENT**
NAME **THOMAS A. HOBBS JR**
STREET ADDRESS **3400 NEWBERRY DR**
CITY-ST-ZIP **DETROIT, MI 48202**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SEC/TREAS**
NAME **KEITH REID**
STREET ADDRESS **340 NORTH 1ST DR**
CITY-ST-ZIP **STAN LON, AZ 85901**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Conroy

Date

Daytime Phone #

5/31/02 832.912.8589

CR2E034B (12/01)

May 31, 2002

Attached
R00000115798
112800

To Whom It May Concern:

Please accept out payment of \$150.00 for filing of our UBR report. We did not receive our report this year because of the corporation moving to Texas. When we called and requested a form it took over two weeks to receive. Enclosed is our full payment. Thank you in advance for your consideration.

Michael C McVay


Registered Agent