2002 UNIFORM BUSINESS REPORT (UBR) 05-15-2002 90147 008 ***150.00 P01000002602 DOCUMENT # 1. Entity Name ALLEN G. INC. 02 JUN 26 PM 2: 33 SECRETARY OF STATE Principal Place of Business Mailing Address 7720 CARRICK COURT 7720 CARRICK COURT 962393 ORLANDO FL 32835 ORLANDO FL 32835 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State Not Applicable Country Country Zip \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ALLEN, GILBERT Street Address (P.O. Box Number is Not Acceptable) 7720 CARRICK COURT ORLANDO FL 32835. Zip Code City 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, 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 After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (9/01 ☐ Addition TITLE ☐ Delete TITLE ALLEN, GILBERT NAME NAME STREET ADORESS 7720 CARRICK COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32835 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition iufe. Change 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 ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition STREET ADDRESS STREET ADDRESS C!TY-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 supplied ental 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 of 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

4-25-02

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th an address, with all other like

FAX COVER SHEET

ALLEN G, INC 7720 CARRICK CT. ORLANDO, FLORIDA 32835 407-382-9919 office 407-532-8340 Fex

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