## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000005596

1. Entity Name



FILED Mar 19, 2003 8:00 am Secretary of State

03-19-2003 90175 014 \*\*\*150.00

FLURIDA	A BHOKERAGE CORPORAT	ION		
Principal Place of Business 4190 BELFORT RD. STE 300 JACKSONVILLE FL 32216		Mailing Address 4190 BELFORT RD. STE 300 JACKSONVILLE FL 32216		
2. Principal Place of Business		3. Mailing Address		T THE WORLD BY THE BURN THAT BEING BEING BEING BEING BEING BURN BURN BURN BURN BURN BURN BURN BURN
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 59:3598669 369 / 463 Applied For Not Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
WATCON TODD FCO			Name	
Watson, todd esq 7785 Baymeadows Way, Ste 107			Street Addres	ss (P.O. Box Number is Not Acceptable)
JACKSO	NVILLE FL 32257			
			City	FL Zip Code
8. The above the obliga	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accep
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable, (NOT	E: Registered Agent signature requ	ired when reinstating) DATE
F	FILE NOW!!! FEE IS \$150.00		gon organization rodd	DAIE
Afte	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	f State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees
10.	OFFICERS AND	i	11,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	D	☐ Delete	TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS	FORRESTER, WILLIAM M JR		NAME	_ Olding
CITY-ST-ZIP	4190 BELFORT RD, STE 300 JACKSONVILLE FL 32216		STREET ADDRESS CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME CERET ADDRESS			NAME	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	
TITLE	<u> </u>	☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	Change Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	
TITLE	*	□ Delete	TITLE	[] Character [] 4 July 1
NAME		<u> </u>	NAME	Change Addition
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP	
TITLE		☐ Delete	TITLE NAME	☐ Change ☐ Addition
NAME				
			STREET AUDRESS	
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP TITLE		☐ Delete		☐ Change . ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	·	☐ Delete	CITY-ST-ZIP TITLE NAME	☐ Change , ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE	·	□ Delete	CITY-ST-ZIP	Change , C Addition

of the corporation or the receive changed, or on an attachment y his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

William M. Forsessen Ja. 3/17/03

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE ATLANTA GA 39901 DATE OF THIS NOTICE: 01-24-2001 NUMBER OF THIS NOTICE: CP 575 A EMPLOYER IDENTIFICATION NUMBER: 59-3691463 FORM: SS-4 0716933153 B

POIOXXXXXX

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

FLORIDA BROKERAGE CORPORATION
4190 BELFORD RD STE 300
JACKSONVILLE FL 32216

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 59-3691463. 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.