

**FILED**  
**May 02, 2003 8:00 am**  
**Secretary of State**

05-02-2003 90231 010 \*\*\*150.00

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            |                                                                                                                                                                                        |                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P01000012551</b><br>1. Entity Name<br><b>NEXT LEVEL PROMOTIONS, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                            |                                                                                                                                                                                        |                                                                                                                                                   |
| Principal Place of Business<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Mailing Address<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                                                                               |                                                                                                                                                   |
| 2. Principal Place of Business<br><i>14618 Sagamore Ct.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                            | 3. Mailing Address<br><i>14618 Sagamore Ct.</i>                                                                                                                                        |                                                                                                                                                   |
| Suite, Apt. #, etc.<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                            | Suite, Apt. #, etc.<br>                                                                                                                                                                |                                                                                                                                                   |
| City & State<br><i>Fort Myers FL</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | City & State<br><i>Fort Myers FL</i>                                                                                                                                                   |                                                                                                                                                   |
| Zip<br><i>33908</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            | Zip<br><i>33908</i>                                                                                                                                                                    |                                                                                                                                                   |
| Country<br><i>USA</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                            | Country<br><i>USA</i>                                                                                                                                                                  |                                                                                                                                                   |
| 4. FEI Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                            | Applied For<br><input checked="" type="checkbox"/> Not Applicable                                                                                                                      |                                                                                                                                                   |
| 5. Certificate of Status Desired                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                            | <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                |                                                                                                                                                   |
| 6. Name and Address of Current Registered Agent<br><br>HENNING, RHONDA<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            | 7. Name and Address of New Registered Agent<br>Name <i>Rhonda Henning</i><br>Street Address (P.O. Box Number is Not Acceptable)<br><i>14618 Sagamore Ct.</i><br>City <i>Fort Myers</i> |                                                                                                                                                   |
| State <i>FL</i> Zip Code <i>33908</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                            | State <i>FL</i> Zip Code <i>33908</i>                                                                                                                                                  |                                                                                                                                                   |
| 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. I am familiar with, and accept the obligations of, the stated agent.<br>SIGNATURE <i>Rhonda A. Henning</i> DATE <i>4/25/03</i><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature Required when distributing)</small>                                                                                                                                                                                            |                                            |                                                                                                                                                                                        |                                                                                                                                                   |
| 9. Election Campaign Financing<br>Trust Fund Contribution.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                            | <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                   |                                                                                                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                            | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                  |                                                                                                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>VD<br>SENTES, STEVEN<br>406 SE 10TH AVE<br>CAPE CORAL, FL 33990                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>PD<br>HENNING, MICHAEL C<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>SD<br>SENTES, CINDY<br>406 SE 10TH AVE<br>CAPE CORAL, FL 33990                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>TD<br>HENNING, RHONDA A<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>TD<br>HENNING, RHONDA A<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>TD<br>HENNING, RHONDA A<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>TD<br>HENNING, RHONDA A<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>TD<br>HENNING, RHONDA A<br>1672 HIBISCUS DR<br>SANIBEL, FL 33957                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                            |                                                                                                                                                                                        |                                                                                                                                                   |
| SIGNATURE: <i>Rhonda A. Henning</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            | DATE: <i>4/25/03</i> 239/472-0118                                                                                                                                                      |                                                                                                                                                   |

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☒ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)