FILED 2002 UNIFORM BUSINESS REPORT (UBR) Aug 04, 2002 8:00 am Secretary of State DOCUMENT # P01000015466 1. Entity Name 08-04-2002 90165 009 ***150.00 TEE TIME D.C. INC. Principal Place of Business Mailing Address 2367 WORLD PARKWAY BLVD 2367 WORLD PARKWAY BLVD 972292 **CLEARWATER FL 33763 CLEARWATER FL 33763** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent correction LAST NAME Name CONTORO, DOMINIC CONTORNO Street Address (P.O. Box Number is Not Acceptable) 1505 W VIRGINIA LN **CLEARWATER FL 33759** City Zip Code 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 registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. RECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OWNER TITLE ☐ Delete TITLE Change ☐ Addition NAME CONTORO, DOMINIC LORRECTION NAME 1505 W VIRGINIA LN STREET ADDRESS STREET ADDRESS CONTORNO CITY-ST-ZIP **CLEARWATER FL 33759** CITY-ST-ZIP ☐ Delete TITLE Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME NAME : STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IB TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME

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 empewered 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

STREET ADDRESS

CITY-ST-7IP

SIGNATURE: 5

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

attachment 972292 #P01000015466

7-30-02

TO THE FLORIDA DEPARTMENT OF STATE , DIVISION OF CORPORATIONS;

THIS CHECK IS FOR THE UNIFORM BUSINESS REPORT THE I DID NOT RECIEVE BACK IN JANUARY. AFTER CALLING YOUR OFFICE, I WAS ADVISED TO SEND THIS IN AS SOON AS POSSIBLE. I CALLED ON 7/31/02 AFTER RECIEVING YOUR LETTER THAT IT HAD NOT BEEN PAID. I DO PAY ALL OF MY TAX OBLIGATION AS SOON AS THEY ARE DO. THE PLACE WHERE MY BUSINESS IS LOCATED, AND THE NUMBER OF PEOPLE THAT HANDLE THE MAIL, IS PROBABLY THE REASON I DID NOT RECIEVE IT. THIS IS A VERY BIG COMPLEX, AND MY BUSINESS IS ONLY A VERY SMALL PIECE OF IT. I HOPE YOU UNDERSTAND MY PROBLEM AND EXCEPT MY CHECK WITHOUT PENALTY. THANK YOU FOR YOUR ASSISTENCE IN THIS MATTER.

PRESIDENT,OWNER DOMINIC CONTORNO

2367 WORLD PARKWAY BLVD. CLEARWATER, FL. 33763

727-726-7773

CK # (7381) 7381

FET # 62.02-226771-20-9

Doc # PO1000015466

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