

FILED
May 15, 2003 8:00 am
Secretary of State

05-15-2003 90110 028 ***150.00

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

DOCUMENT # P01000017006 1. Entry Name ALWAYS AVAILABLE, INC.					
Principal Place of Business 566 NE 20TH STREET, #12 WILTON MANORS, FL 33305			Mailing Address 566 NE 20TH STREET, #12 WILTON MANORS, FL 33305		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number: 65-1083606	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				<input type="checkbox"/> CHECK HERE IF MAKING CHANGES	
6. Name and Address of Current Registered Agent GRECH, GLEN GARY 566 NE 20TH STREET, #12 WILTON MANORS, FL 33305			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when reappointing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing 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 NAME STREET ADDRESS CITY-STATE-ZIP	0 GRECH, GLEN GARY 566 NE 20TH STREET, #12 WILTON MANORS, FL 33305	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		<input type="checkbox"/> Delete			
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 of the individual empowered.					
SIGNATURE: _____ 5/12/03 (954) 390-7473 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

90134950



CR2034 (10/02)

Attachment
90134950
PO1000017006

ALWAYS AVAILABLE, INC.
566 NE 20th Street, #12
Wilton Manors, FL 33305

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

May 12, 2003

Re: ALWAYS AVAILABLE, INC.
ANNUAL RENEWAL FEE

Gentlemen:

I never received the UBR for year '2003 for the above referenced corporation. The address given was correct. For some reason it did not arrive by mail. Had I received it, the payment would have been sent to you on time

Enclosed please find a check in the amount of \$150.00 for the annual renewal fee. I hope that this explanation is acceptable for renewal of my corporation, ALWAYS AVAILABLE, INC., for '2003.

Thank you for your cooperation in this matter.

Very truly yours,



Glen Gary Grech
President, ALWAYS AVAILABLE, INC.

Enclosure