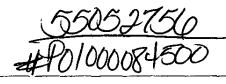
## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Jun 19, 2003 8:00 am Secretary of State

1. Entity Name	MENT # POI DOOD Hank Connect l Estall, Inc	ial V		06-19-2003 90045 034 ***150.00	
DO NOT WRITE IN THIS SPACE					
2. Principal Pla	DIMSTERIA D. 192	alling Address OD OIMSE Ite, Apt. #, etc.	ed DR.	DO NOT WRITE IN THIS SPACE	
City & State Lakel	WOTH FL (C) LOT COUNTRY SA Zie	y & State WX & 33467	h, FL Countris A	4. FEI Number Applied For Not Applicable  5. Certificate of Status Desired Status Desired Required	e
	7. Name and Address of Current Registered Agent  WCDCR B HAWKINS  ess (P.O. Box Number is Not Acceptable)  ODOMS COD DIVE  AICE WOYN FL Zipcpapy 6-7	7			
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 or registered agent and iste 4 applicable.  INCTS: Registered Agent signature required when renstating)  DATE  January 1 - May 1 Fee is \$150.00					
••	After May 1, Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of State OFFICERS AND DIRECT	Ope		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lourence B. Hau a 202 Olmstea Lake Worth FL.	LINS IVE 33467	TITLE NAME STREET ADDRESS CITY-ST-ZIP		10000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert R. Horn 4531 Parker AV West Palm Brack	er Jr. 1. Fl. 33405	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
TITLE NAME STATET ADDRESS ONY-ST-ZIP			TITLE MAME STREET ADDRESS CITY-ST-ZIP		
THE NAME STREET ADDRESS CITY-SI-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		-
indicated of the co	tion this report or supplemental report is true at	nd accurate and that my I to execute this report a	signature shall have t	t in Section 119.07(3)(i), Florida Statutes. I further certify that the information re the same legal effect as if made under oath; that I am an officer or director pter 607, Florida Statutes; and that my name appears in Block 10 or on an	-

attachment



GrayHawk Commercial Real Estate Inc. 9202 Olmstead Drive Lake Worth, Fl 33467 561-968-3238 Phone 561-968-3687 Fax

## GrayHawk Commercial Real Estate Inc.

May 23, 2003

Florida Department of State Division of Corporations P.O Box 6327 Tallahassee, FL 32314

RE: GrayHawk Commercial Real Estate EIN Number 65-1097709

To Whom It May Concern:

Per a conversation with one of your representatives, we are notifying you that we did not receive our 2003 Uniform Business Reports to file prior to the May 1<sup>st</sup> deadline. We are also requesting that any additional fees be waived.

We were also instructed to obtain the forms online and to complete them and attach with this letter.

Please contact either Stacy Roherty or myself at 561-968-3238 if you should have any questions.

Respectfully,

Tina M. Hawkins

Cc. File