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

## **FILED** Jul 01, 2002 8:00 am Secretary of State 07-01-2002 90354 044 \*\*\*158.75

DOCUMENT #	40100	0020016
Entity Name	,	V = 4,4 4 7 P

CRIMALI, INC.

	DO NOT WRITE	IN THIS S	PACE	B0126352
	2. Principal Place of Business  3. Mailing Address  SAME			
Suite Apt.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State	e ONVICLE, FC	City & State		4. FEI Number Applied For S9 - 3701996 Not Applied For
Zip 3221	6 Country USA	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	DO NOT W		Street A	7. Name and Address of Current Registered Agent  e REED W. CRIMM  et Address (P.O. Box Number is Not Acceptable)  - SO W. CAURA ST
			City	JACKSONVILLE FL Zip Sode
Tax filing re See criteri  11.  ITILE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND E  ORES.  TRACY H. GRIMM  1867 CARAVAN TR  JACKSONVILLE, F  CHAIRMAN	Make Check Payab	1, Fee is \$550.0(d UBR is \$61.25) le to Departmen  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Trust Fund Contribution. Added to Fees
NAME STREET ADDRESS CITY-ST-ZIP	RICHARD P. MALIN 1867 CARAVAN TR JACKSONVILLE, FC	, STE 108	NAME STREET ADDRESS CITY-ST-ZIP	S
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
ITLE IAME ITREET ADDRESS EITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
ITLE AME TREET ADDRESS ITY-S7-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	
ITLE  AME  TREET ADDRESS  ITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	ated 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 attachment with an address, with all other like empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-25-02

904-723-3005

June 25, 2002

Florida Department of State **Division of Corporations** P.O. Box 1500 Tallahassee, FI 32302-1500

To Whom It May Concern,

I called the Division of Corporations on 6-17-02 to report the fact that my business, Grimali, Inc., had not yet received a Uniform Business Report for 2002. The person I spoke to instructed me to write a letter to this effect, and mailed me a blank one. Enclosed you will find that form completed, along with the payment and the letter from the Department of State. Thank you for your assistance.

Sincerely

Tracy H Grimm Grimali, Inc.



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

June 17, 2002

GRIMALI, INC. 1867 CAŔAVAN TR, STE 108 JACKSONVILLE, FL 32216

SUBJECT: GRIMALI, INC. Ref. Number: P01000020016

Pursuant to our telephone conversation of June 17, 2002, I am enclosing a blank uniform business report.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan Document Specialist

Letter Number: 102A00039335

Attockment B0196352



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 18, 2002

BAY AREA IMAGING, INC. P.O. BOX 18412 TAMPA, FL 33679

SUBJECT: BAY ABEA-IMAGING, INC. Ref. Number: P99000036305

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott Document Specialist

Letter Number: 302A00039614

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