

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

04-28-2002 90781 040 \*\*\*150.00

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

DOCUMENT # P01000020819

1. Entity Name  
3281 Company, Inc d/b/a The Field

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <u>3281 Griffin Road</u> Suite, Apt. #, etc.	3. Mailing Address <u>3281 Griffin Road</u> Suite, Apt. #, etc.
City & State <u>Dania, FL</u>	City & State <u>Dania, FL</u>
Zip <u>33312</u>	Country <u>USA</u>
Zip <u>33312</u>	Country <u>USA</u>

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4. FEI Number  
65-1085746

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name Phil McMullen

Street Address (P.O. Box Number is Not Acceptable)  
3281 Griffin Rd

City Dania FL Zip Code 33312

**DO NOT WRITE IN THIS SPACE**

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.

SIGNATURE Phil McMullen DATE 5/10/02

Signature of type of person name of registered agent and not applicable. (NOTE: Registered Agent signature required when re-registering)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.

January 1 - May 1 Fee is \$150.00  
 After May 1, Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
President	Phil McMullen	3281 Griffin Rd	Dania, FL 33312				
Director	Alan Craig	3281 Griffin Rd	Dania, FL 33312				

**DO NOT WRITE IN THIS SPACE**

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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all duties like empowered.

SIGNATURE: Phil McMullen DATE 4/13/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PHIL McMullen

CR2E034B (12/01)