

**FILED**  
**Sep 12, 2002 8:00 am**  
**Secretary of State**

09-12-2002 90066 006 \*\*\*150.00

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

DOCUMENT # **P01000027107**

1. Entity Name  
**Par 4, Inc.**

**DO NOT WRITE IN THIS SPACE**

125 75

2. Principal Place of Business <b>8328 N. Florida Ave</b>		3. Mailing Address <b>same</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Tampa, Florida</b>		City & State	
Zip <b>33604</b>	Country <b>USA</b>	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>593725785</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name <b>Paul A. Russo</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>8328 N. Florida Avenue</b>	
City <b>Tampa</b>	FL Zip Code <b>33604</b>

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

*Paul Russo*

Signature of typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reconstituting)

**Aug 30, 2002**  
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>January 1 - May 1: Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Department of State</b>
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10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>President, Director Paul A. Russo 8328 N. Florida Ave. Tampa, FL 33604</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>Secretary, Director Stuart McKown 8328 N. Florida Ave. Tampa, FL 33604</b>
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**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 118.07(3)(f), 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 other like empowered.

SIGNATURE:

*Paul Russo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Aug 30, 2002** 813-931-1275  
 Date Daytime Phone #

CR2E034B (12/01)

*Attachment*

**Drummond & Associates**  
**6714 113<sup>th</sup> Avenue**  
**Temple Terrace, Florida 33617**  
**(813) 914-0015**  
**Fax (813) 985-7256**  
**Email: thd@tampabay.rr.com**

August 28, 2002

Division of Corporations  
Attn: Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302

Re: Par 4, Inc., Document No. P01000027107

*125395*

Dear Sir/Madam:

Enclosed is the 2002 Uniform Business Report ("UBR") for Par 4, Inc. ("PAR 4"), along with their check in the amount of \$150.00. Our client has not received any notifications from the Department of State in connection with its Uniform Business Report for 2002. This may be due to a change of address for the entity and for the registered agent.

We are submitting PAR 4's payment of \$150 to cover the year 2002, and respectfully request that you waive the penalty. Please call if you have any questions or if I can be of further assistance in this matter. Thank you for your assistance.

Sincerely,

*Temple H. Drummond*

Temple H. Drummond

Enclosure(s)

cc: Mr. Paul A. Russo