(4/03)

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

Aug 14, 2003 8:00 am Secretary of State P01000029193 DOCUMENT # 08-14-2003 90144 001 ***150.00 1. Entity Name 08-14-2003 90144 002 ***400.00 DIVISION 15, INC. Principal Place of Business Mailing Address 6500 SW 7TH ST 6500 SW 7TH ST MARGATE FL 33068 MARGATE FL 33068 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied Fo 65-1086543 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CANHAM, DON R Street Address (P.O. Box Number is Not Acceptable) 6500 SW 7TH ST MARGATE FL 33068 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 DATE (NOTE; Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition CANHAM, DON R NAME NAME 6500 SW 7TH STREET STREET ADDRESS STREET ADDRESS MARGATE FL 33068 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CANHAM, DON R 3 NAME STREET ADDRESS 6500 SW 7TH STREET STREET ADDRESS CITY-ST-ZIP MARGATE FL 33068 CITY-ST-ZIP ☐ Delete TITLE_ TITLE ____Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZiP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE. Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE □ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

Attachment # 55054215

DIVISION 15, INC. POICCOURGING

6500 SW 7TH STREET MARGATE, FL. 33068

August 11, 2003

Florida Department Of State Attn: Division Of Corporations

P.O. Box 6327

Tallahassee, Fl. 32314

Uniform Business Report

OUCH! In accordance with the instructions, "Frequently Asked Questions", located on last page of the UBR. This report is the first and only notice we have received for 2003. Furthermore the notice was received less than 30 days prior to this letter. It would be absurd to ignore the first notice to file when received, knowing such a drastic penalty would be incurred. In the sense of fair play I have enclosed two checks totaling \$550.00. In conclusion, should our appeal to waive the penalty charges be deemed valid, the check for \$400.00 may either be refunded/returned. In any event please advise me of the decision, thank you very much.

Sincerely,

Don R. Canham, President