P01000042230

TEMMA PUBLISHING INC.

Principal Place of Business

3901 S OCEAN DRIVE #7-S HOLLYWOOD FL 33019

2. Principal Place of Business

Mailing Address

3901 S OCEAN DRIVE #7-S

HOLLYWOOD FL 33019

3. Mailing Address



DATE

DO NOT WRITE IN THIS SPACE 4. FEI Nuprber Applied For Not Applicable \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE CREATIONS NETWORK INC Street Address (P.O. Box Number is Not Acceptable) 941 FOURTH ST #200 MIAMI BEACH FL 33139 City 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. 9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$550.00

(NOTE: Registered Agent signature required when reinstating)

After September 13, 2002 Fee will be \$750.00

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

(See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE □ Delete TITLE Change ☐ Addition SEPULVEDA, RUBEN D NAME NAME 3901 S OCEAN DRIVE #7-S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33019 CITY-ST-ZIP TITLE Delete TITLE Change iaren Schl NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete -TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

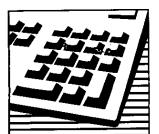
I hereby certify that the information adpolled with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if with all other like empowered.

SIGNATURE

Date

Daytime Phone #





QTA ASSOCIATES, INC.

QUICKBOOKS • TAX • ACCOUNTING

August 27, 2002

Division of Corporations Uniform Business Report Filings PO Box 1500

Tallahassee, FL 32302-1-500

Document # P01000042230 Temma Publishing Inc. RE:

Dear Sir or Madam:

Enclosed please find check number 1001 in the amount of \$150.00 to cover the 2002 Uniform Business Report for Temma Publishing Inc. I have just recently been retained for accounting and tax purposes. The taxpayer received inaccurate information regarding the payment of the annual fee from his prior accountant. Temma Publishing Inc. is a new business and the officers were unaware of the requirements and relied upon the accounting professionals which were hired.

We are respectfully requesting abatement of the penalties associated with this matter. Thank you for your understanding concerning this situation.

Sincerely,

Angela DiCrescenzo, CPA

Enclosures