| 2002 UNIFORM BUSI | | RT (UBR) | FILED Sep 08, 2002 8:00 am Secretary of State |
|--|--|--|--|
| 1. Entity Name | | | 09-08-2002 90126 048 ***150.00 |
| BROTHERS DOWN UNDER, INC. | | | |
| Principal Place of Business | , i i i i i i i i i i i i i i i i i i i | | |
| 192 BERMUDA PETREL COURT DAYTONA BEACH FL 32119 | 192 BERMUDA PETREL CO DAYTONA BEACH FL 32119 | | |
| | | | |
| 2. Principal Place of Business | 3. Mailing Address | IN AUF | T TORALOUI AT TORAL THE CONTRACT OF A CONTRACT |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | UN /TUE | DO NOT WRITE IN THIS SPACE |
| DCity & State | City & State | | 4. FEI Number |
| Zip Duntry | Zip | Country | 59 - 3719 226 Not Applicable 5. Certificate of Status Desired \$8.75 Additional |
| 6. Name and Address of Current F | egistered Agent | | 7. Name and Address of New Registered Agent |
| Cortez, Anthony 192 Bermuda Petrel Court | · · | Street Addres | DERTT J- CORTEZ s (P.O. Box Number is Not Acceptable) |
| DAYTONA BEACH FL 32119 | | 132 2 City D | AKEWOOD VILLAGE |
| 8. The above named entity submits this statement for | the purpose of changing its r | MAR | tered agent, or both, in the State of Florida. I am familiar with, and accept |
| the obligations of rappletered agent. | 10 | - • | Q.(02 |
| SIGNATURE | d title if applicable. (NOTE: | Registered Agent signature requ | ired when reinstating) DATE |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) | | | |
| 11. OFFICERS AND D | | 12. TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |
| NAME CORTEZ, ANTHONY STREET ADDRESS 192 BERMUDA PETREL COURT CITY-ST-ZIP DAYTONA BEACH FL 32119 | | NAME STREET ADDRESS CITY- ST-ZIP | Change Addition |
| TITLE U.P. NAME STREET ADDRESS 132 LAKEWOO VILLAGE | | TITLE Name Street address | Change Addition |
| CITY-ST-ZIP PORT ORANGE, FL 32119 | | CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS | Delete | TITLE NAME STREET ADDRESS | Change Addition |
| CITY-ST-ZIP TITLE | | -CITY-ST-ZIP - TITLE | |
| NAME STREET ADDRESS | | NAME STREET ADDRESS | |
| CITY-ST-ZIP | _ | CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Change Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Change Addition |
| 13. I hereby certify that the information supplied with t indicated on this report or supplemental report is t of the corporation or the receiver ar tryftee empoy changed, or on an attachment with an address, with SIGNATURE: | his filing does not qualify for t rue and accurate and that my vered to execute this report a thall other like expowered RECACOUSE INTED NAME OF SIGNING OFFICER OF | r signature shall have th s required by Chapter 6 | Section 119.07(3)(i), Florida Statutes. I further certify that the information e same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 11 or Block 12 if Q-6-02 (3%) 300-1708 |

Htochmer #

65 Dunlawton Avenue, Port Orange, Florida 32127 (904) 322-1708

September 6, 2002

Department Of State,

It has come to my attention that the Uniform Business Report for Brothers Down Under Inc. dba Harbour Lights Restaurant has not been filed. I realize that this report is required between January 1st and May 1st each and every year.

It has also come to my attention that this corporation has received no prior notice and would like to ask the Department of State to waive the \$400.00 late fee.

Enclosed with this letter is our U.B.R. and the original \$150.00 filing fee. If there are any questions about this report please feel free to contact me at (386) 322-1708.

Thank you Anthony Cortez