2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an

Sep 09, 2002 8:00 am Secretary of State P01000055854 DOCUMENT # 1. Entity Name 09-09-2002 90006 026 ***150 00 GO4TH, INC. Principal Place of Business Mailing Address 2250 SW 28TH TERRACE 2250 SW 28TH TERRACE FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FFI Number Not Applicable -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 **BUSINESS FILINGS INCORPORATED** Street Address (P.O. Box Number is Not Acceptable) 1000 WEST AVENUE SUITE 1114 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 Fiorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition GIAMBATTISTA, MIKE NAME NAME 2250 SW 28TH TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-7IP FORT LAUDERDALE FL 33312 CITY-ST-7/P TITLE ☐ Delete TITLE Change ☐ Addition GIAMBATTISTA, LINDA NAME NAME STREET ADDRESS 2250 SW 28TH TERRACE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33312 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TIT! F ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 trusted empowers in Elock 12 if

er like empowered

FILED

Attach west \$01000055-85-4



September 9, 2002

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

Dear Madam or Sir:

Enclosed please find a check in the amount of \$150.00 for our UBR filing fee. I did not receive any prior notice of this fee, and therefore, am only paying the original fee and not the late penalty.

If you have any questions regarding this matter, please do not hesitate to call.

Sincerely,

Mike Giambattista

President)

Go4th, Inc.