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FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUL 24 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-08/01/02--01037--001

****150.00 ****150.00

DOCUMENT # PD1000064788

1. Entity Name
ZOFIA DROZDOWSKA CORPORATION ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1503 57TH AVENUE W
Suff. Apt. #, etc.

3. Mailing Address
1503 57TH AVE W
Suff. Apt. #, etc.

City & State
BRADENTON, FL

City & State
BRADENTON, FL

City & State
34207 MANATEE

City & State
34207

Country

4. FEI Number
65-1124842

Applied For
New Approaches

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
ZOFIA DROZDOWSKA

Street Address (P.O. Box Number Not Applicable)
331 MC ARTHUR AVE

City
SARASOTA

FL 34243

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 *Zofia Drozdowska* ZOFIA DROZDOWSKA, PRESIDENT

Signature, typed or printed name of registered agent and title if any (Section 190.07(3)(b)) (NOTE: Registered Agent signature required when amending) (Date)

9. This corporation is eligible to satisfy its obligations Tax filing requirement and elects to do so. (See criteria on back)

10. Election Campaign Financing Trust Fund Contributions \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT ZOFIA DROZDOWSKA 331 MC ARTHUR DR SARASOTA, FL 34243
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(j), 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 copies, as empowered.

SIGNATURE: *Zofia Drozdowska* 5-17-02 941-756-4659

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR (Date) (Telephone Number)

CR030348 (12/01)

B

2 of 2

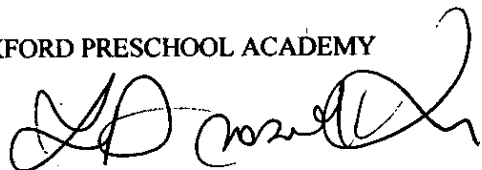
TO THE ATTENTION OF MR. TYRONE SCOTT.

I SEND MY ANNUAL REPORT WITH OUT MY SIGNATURE. REPORT WAS SEND BACK TO ME BUT I DID NOT SEND BACK ON TIME . MY DAUGHTER HAVE CANCER AND WE ALMOST LOST HER..I SPEND MOST OF MY TIME CARING FOR HER , THIS IS THE REASON WHY I DID NOT SEND MY PAPERS BACK.

ZOFIA DROZDOWSKI CORP.

DBA OXFORD PRESCHOOL ACADEMY

BRADENTON FL.JULY 11/2002

A handwritten signature in black ink, appearing to read 'Zofia Drozdowski', is written over the printed name of the sender.