

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 17, 2002 8:00 am**  
**Secretary of State**

07-17-2002 90125 031 \*\*\*150.00

**DOCUMENT # P01000071398**

1. Entity Name  
**HIGHLIGHT CONNECTIONS INC.**

Principal Place of Business  
**16661 LOS GATOS DRIVE**  
**DELRAY BEACH FL 33484**

Mailing Address  
**16661 LOS GATOS DRIVE**  
**DELRAY BEACH FL 33484**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65 112 5022**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GLOYNE, ALAN**  
**16661 LOS GATOS DRIVE**  
**DELRAY BEACH FL 33484**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
**MR**  
NAME  
**JAMES ALAN GLOYNE**  
STREET ADDRESS  
**16661 LOS GATOS DR**  
CITY-ST-ZIP  
**DELRAY BEACH FL 33484**

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CR2E034 (4/02)

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 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 changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**7/10/02 (SG) 4950907**

Attachment PO10000 71398  
121619

Highlight Connections  
16661 Los Gatos Dr  
Delray Beach FL 33484

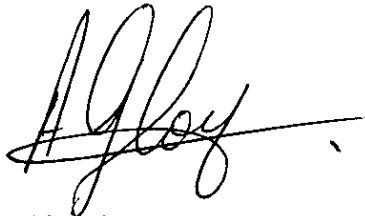
Division of Corporations  
UBR Filings  
PO Box 1500  
Tallahassee, FL 32302

July 10, 2002

Dear Sir,

Please find enclosed a check for 150 dollars as being the pre May Fee, as Highlight Connections did not receive a UBR application prior to this date.

Thanking you,

A handwritten signature in cursive script, appearing to read 'A. Gloyne', with a horizontal line drawn through the middle of the signature.

Alan Gloyne