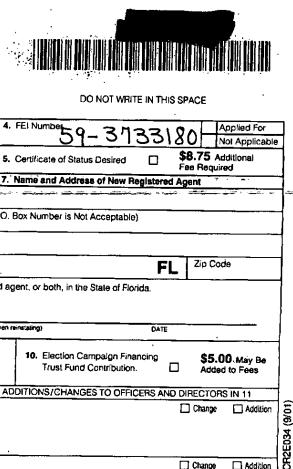
## 2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** P01000072484 1. Entity Name HARDWARE & BUSINESS SOLUTIONS, INC. Principal Place of Business Mailing Address 104 MAGNOLIA LANE 104 MAGNOLIA LANE PALATKA FL 32177-8882 PALATKA FL 32177-8882 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Zip Country Ζiρ Country 6. Name and Address of Current Registered Agent SHEFFIELD, CATHERINE H Street Address (P.O. Box Number is Not Acceptable) 104 MAGNOLIA LANE PALATKA FL 32177-8882 City 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 Signature, typed or printed name of registered eigent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

## FILED Jun 02, 2002 8:00 am Secretary of State

05-03-2002 90047 013 \*\*\*150.00



CITY-ST-ZIP Palatka fl 32177-8882 CITY-ST-ZIP TITLE Delele TITLE ☐ Chance · C Addition NAME SHEFFIELD, CASEY J NAME STREET ADDRESS 325 HWY 315 N STREET ADDRESS CITY-ST-ZIP INTERLACHEN FL 32148 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME SHEFFIELD: JASON 1 NAME STREET ADDRESS 126 RAINTREE TRAIL STREET ADDRESS CITY-ST-ZIP PALATKA FL 32177 -CITY-ST-ZIP TITLE TILE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

☐ Delete

☐ Delete

12

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-SI-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 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

9. This corporation is eligible to satisfy its Intangible

SHEFFIELD, CATHERINE H

104 MAGNOLIA LANE

PALATKA FL 32177-8882

Sheffield. Rodney C

**104 MAGNOLIA LANE** 

OFFICERS AND DIRECTORS

Tax filing requirement and elects to do so.

(See criteria on back)

114

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-77P