

2002 UNIFORM BUSINESS REPORT (UBR)

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

07-17-2002 90130 005 ***150.00

DOCUMENT # P01000073042

1. Entity Name
PROGRAM-ABILITY CORPORATION

Principal Place of Business
4535 NW 50 COURT
COCONUT CREEK FL 33073

Mailing Address
4535 NW 50 COURT
COCONUT CREEK FL 33073



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1123757

Applied For

Not Applicable

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

NOBLE, VIVIAN
4535 NW 50 COURT
COCONUT CREEK FL 33073

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 NAME STREET ADDRESS CITY-ST-ZIP	CEO NOBLE, JEFF 4535 NW 50 COURT COCONUT CREEK FL 33073	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NOBLE, VIVIAN 4535 NW 50 COURT COCONUT CREEK FL 33073	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-02

561-999-3534

CR2E034 (4/02)

Attachment
701000073042
B012967

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

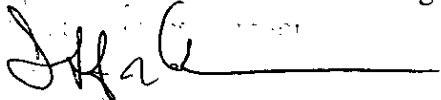
Jeff Noble
Program-Ability Corporation
4535 NW 50 Court
Coconut Creek, Fl. 33073-2916

To Whom It May Concern:

I spoke with a representative of the Division of Corporations, and I explained to her that I had not received correspondence in the mail for renewing my corporate filings. She explained to me that I could write a letter (this letter) and send in the amount of \$150.00 to pay for my Uniform Business Report Filing.

I understand that it is my responsibility to keep my corporation in order with the state of Florida, however since this is a new corporation, and I have not had to re-new in the past, I was unaware that the renewal date had passed. Please accept my apologies in this matter, and my assurance that it will not happen again.

Thank you for your understanding.



Jeff Noble
Program-Ability Corporation
President