FILED Jul 23, 2002 8:00 am Secrétary of State

07-11-2002 90240 035 ***150 00

2002 UNIFORM	BUSINESS	REPORT (UBI	3)

P01000075670 DOCUMENT # 1. Entity Name STEVE CLARK, INC. Mailing Address 39255 Principal Place of Business 3752 SE OCEAN BLVD. 3752 SE OCEAN BLVD. STUART FL 34996 STUART FL 34996 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-1125640 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 👉 🔲 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CLARK, STEVE Street Address (P.O. Box Number is Not Acceptable) 364 NW BAYONET PL JENSEN BEACH FL 34957 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NCTE: Registated Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (4/02) Addition TITLE Vice President Delete TITLE NAME Wendalyn clask CLARK, STEVE NAME **CR2E034** STREET ADDRESS STREET ADDRESS 3752 SE OCEAN BLVD. CITY-ST-ZIP CITY-ST-ZIP STUART FL 34996 Tersen Change ☐ Addition Lice President TITLE ME NAME v Add MEAR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition IIILE Change HILE . Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete ΠILE TITLE NAME KAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZIP CITY-ST-7/P Change ☐ Addition Defete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this fling 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 flue and abcurage 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 employed do to exactly 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 772-220*-300*6 SIGNATURE:

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AHach ment

July 19,2002

To: the Secretary of State

From: Steve Clark

3752 S.E. Ocean Blvd.

Stuart Fl. 34996 772-220-3000 #POI 000075670

I am writing in reference to the letter that was sent to my on July 15,2002.

I spoke to a representative from your office on July 3,2002 regarding the filing of my corporation paper work. The lady told me to send a check for \$150.00 and the form to the state and this would be ok. She also informed me that I would receive this paperwork again in January and that I must turn it in by May.

I had all my paperwork from the store at my accountants office I assumed that this was part of my taxes, I was unaware of this being separate from taxes. I am asking again that you reconsider this late fee it is a big burden for me as a small business. I will assure you that this will not happen again next year as I know that this must be paid separate.

Steve Clark

Thank Yo

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