| 2002 UNIFO | RM BUSINESS REPO | RT (UBR) |
|------------|------------------|----------|
| OCUMENT #  | P0100084738      |          |

| DOCUMENT # P0100084738  PYPER PROPERTIES INC.  |  |                                       | FILED   | 398 AV             |
|--|--|---------------------------------------|---|--------------------|
|  |  |                                       | 02 JUN 24 AM 11:02  |                    |
| Principal Place of Business<br>22757 SOUTHSHORE DRIVE<br>LAND O' LAKES FL 34639  | Mailing Address<br>22757 SOUTHSHORE DRI<br>LAND O' LAKES FL 3463 |                                       | SECRETARY OF STATE JALLAHASSEE, FLORIDA   |                    |
| 2. Principal Place of Business   | 3. Mailing Address   | · · · · · · · · · · · · · · · · · · · |   |                    |
|  |  |                                       | DO NOT WHITE IN THE SPACE   |                    |
| Suite, Apt. #, etc. Suite, Apt. #, etc.  |  |                                       | DO NOT WRITE IN-THIS SPACE  |                    |
| City & State   | City & State   |                                       | 4. FEI Number Applie Not Ap   | d For<br>oplicable |
| Zip Country  | Zip  | Country                               | 5. Certificate of Status Desired \$8.75 Addition Fee Required   | nal                |
| 6. Name and Address of Curre   | ent Registered Agent   | Name                                  | 7. Name and Address of New Registered Agent   |                    |
| PEREZ, CRAIG A<br>22757 SOUTHSHORE DRIVE   |  |                                       | s (P.O. Box Number is Not Acceptable)   |                    |
| LAND O' LAKES FL 34639   |  | City                                  | Zip Code  |                    |
| 8. The above named entity submits this statement signature, typed or printed name of registered at 9. This corporation is eligible to satisfy its Intang Tax filling requirement and elects to do so. (See criteria on back) | gent and title if applicable. (NO ible FILE NOW After May 1, 2   | TE: Registered Agent signature requi  | red when reinstating)  DATE  10. Election Campaign Financing \$5.00 North Added to 1.00 |                    |
| 11. OFFICERS A   | ND DIRECTORS   | 12.                                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  | 11                 |
| TITLE PS NAME PEREZ, CRAIG A STREET ADDRESS CITY-ST-ZIP LAND O' LAKES FL 34639   | ☐ Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP | *****158.75 *****158.75 *****158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 ******158.75 *******158.75 *******158.75 *******158.75 *******158.75 *******158.75 ************************************   | 75 (9/01)          |
| TITLE VT PEREZ, SHELBY L 22757 SOUTHSHORE DRIVE LAND O' LAKES FL 34639   | ☐ Defete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change  | Addition 5         |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | □ Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐  | Addition           |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | ☐ Delete   | TITLE NAME STREET ADDRESS             | ☐ Change ☐  | Addition           |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | ☐ Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <u> </u>  | Addition           |
| TITLE NAME STREET ADDRESS  | ☐ Delete   | TITLE NAME STREET ADDRESS             | ☐ Change  | ] Addition         |
| CITY-ST-ZIP  | with this fills and a materiality for                            | CITY-ST-ZIP                           | Section 119.07(3)(i), Florida Statutes. I further certify that the inform   |                    |

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: CLASCO AND PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

PYPER Properties Inc. 22757 Southshore Drive Land O' Lakes, FL. 34639 813-929-0622

Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL. 32302-1500

Re: Uniform Business-Report-

Document Number: P01000084738

To Whom It May Concern:

It has come to my attention that my CPA and myself have had a gross miscommunication error pertaining to the UBR. As this is my first year in business, I was under the assumption that my CPA handled these types of matters when it turns out he was under the assumption that I had already handled this matter. This being the case, as this is my first year in business, I am requesting leniency on the deadline date for the filing fee of \$150.00. Certainly, I would hope that I would be given an opportunity to have my application accepted with my check of \$158.75, which is enclosed.

I hope that you can see your way thru to allowing my application to proceed based on the funds sent with this letter.

Should you need to contact me, please feel free to do so at the following number (813) 929-0622

In addition, my\_CPA, Kenneth Morgan, can be reached at (813) 935-7952 should you need any further information.

Thank you for your understanding in this matter. I can assure you that this mistake will never happen again.

Sincerely.

Craig A. Perez,

President, PYPER Properties

ENC: UBR

UBR Application, Check