

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000089547

FILED
Apr 28, 2002 8:00 AM
Secretary of State

Entity Name: N T O'S PLUS INC.

Current Principal Place of Business:

1206 PERIGRINE WAY
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

1206 PERIGRINE WAY
WESTON, FL 33327

New Mailing Address:

FEI Number: 65-1138893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, MATTHEW
1206 PERIGRINE WAY
WESTON, FL 33327

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: HALL, MATTHEW
Address: 1206 PERIGRINE WAY
City-St-Zip: WESTON, FL 33327

Title: DVT () Delete
Name: CHARLES, VALARIE
Address: 4410 NW 36 ST, #A-203
City-St-Zip: LAUDERDALE LAKES, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW HALL

DPS

04/28/2002

Electronic Signature of Signing Officer or Director

Date