2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2003 8:00 am
Secretary of State
06-02-2003 90184 020 ***150.00

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DOCUMENT # P01000091518

1. Entity Name
HOLDEN ONE CORPORATION

Principal Place of Business	Mailing Address
1892 ABBEY RD. STE I W PALM BCH FL 33415	1892 ABBEY RD. STE I W PALM BCH FL 33415

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1180718 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ENGRAM, SANDRA M
1892 ABBEY RD STE I
W PALM BCH FL 33415

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ENGRAM, SANDRA M 1892 ABBEY RD STE I W PALM BCH FL 33415	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ENGRAM, JAMES E 1892 ABBEY RD STE I W PALM BCH FL 33415	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA M ENGRAM 5/28/03 5619663861
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)

Attachment 90138131

5/28/03 P01000091518

Florida Department of State
Uniform Business Report Filings
P.O Box 1500
Tallahassee FL 32302-1500

To whom This May Concern

Re UBR Filings - Holden Corporation
Holden One Corporation

We know we are late filing these reports. This was an oversight.

We also know and are aware that there is a late fee of One Hundred Dollars per report. However, we are requesting that you consider waiving this fee since we are not over 30 days late and the fact that we genuinely forgot to file.

Yours Sincerely

Sandra M. Cameron-Eggen