

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000095568

1. Entity Name

ATTRACTION COMMUNICATION, INC.

FILED

02 OCT 29 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

112-12 N.W. 16TH CT.
PEMBROKE PINES FL 33026

Mailing Address

112-12 N.W. 16TH CT.
PEMBROKE PINES FL 33026

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

05-113-9906

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARRIDO, AIDE C

112-12 N.W. 16TH CT.

PEMBROKE PINES FL 33026

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

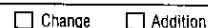
11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GARRIDO, AIDE C
112-12 N.W. 16TH CT.
PEMBROKE PINES FL 33026



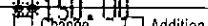
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TITLE
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CITY-ST-ZIP



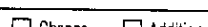
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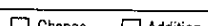
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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

10-03-02 (954)257-9537

CR2E034 (4/02)

MARTA M. FUERTES, CPA
13550 S.W. 88 Street, Ste. 140-8
Miami, Fl. 33186
Office (305) 385-0737 Fax (305) 385-4077

October 1, 2002

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

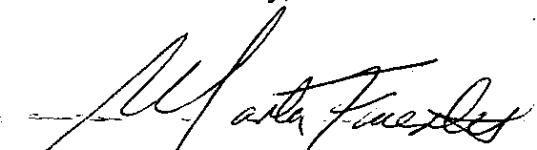
Re: Attraction Communication, Inc. Document #P01000095568

To Whom It May Concern:

This letter is to request a one-time abatement of late filing of the uniform business report. I explained to the owner of this company, Aide C. Garrido, the importance of this report but she explained she has never received the original report.

I am enclosing this with report with a check of \$150.00 hoping you consider this situation and allow a one-time abate of the late filing fee.

Sincerely,



Marta M. Fuertes
Certified Public Accountant