FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SECRETARY OF STATE
DIVISION OF CORPORATIONS DOCUMENT # PO1000101094 1. Entity Name 02 OCT 31 AM 8: 01 Gibson, Inc. DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 12070 NW 49# Drive 49th Dive 12070 NW Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Numbe -1146418 Not Applicable \$8.75 Additional Zip 3307 (5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent inthia (Johnson DO NOT WRITE ss (P.O. Box Number is Not Acceptable) Street Addre IN THIS SPACE Springs Zip Code __**33**0フ6 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. (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 Amended UBR is \$61.25 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE TITLE CONTING J. GIBSIN NAME STREET ADDRESS STREET ADDRESS FL CITY-ST-ZIP 33076 CITY-ST-ZIP TITLE TITLE 300008727513 10/31/02-01047--033 **158,75 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 on an attachment with an address, with all other like empowered.

CR2E034B (12/01)



1 2070 NW 49TH DR. CORAL SPRINGS, FL 33076

October 22, 2002

Dear Sirs:

We have just discovered that we apparently did not receive the Uniform Business Report notices for 2002. We were incorporated in October of 2001 and was unaware of this report filing and for some reason do not appear to have received earlier notices.

Enclosed you will find a completed Uniform Business Report and our check for \$158.75 (to include a Certificate of Status). I would request that the reinstatement fee be waived due to the misunderstanding we had about this filing given our newness as an entity.

Please contact me as soon as possible if this is not acceptable.

Sincerely,

Cynthia J. Gibson

Gth J. Sc.

President