FILED

2002 UNIFORM BUSINESS REPORT (UBR)	Aug 19, 2002 8:00 am
OOLUNELT " TOLLOW	Secretary of State

DOCUMENT# P01000103980 08-19-2002 90146 032 ***150.00 1. Entity Name SHARPE DESIGNS, INC. Principal Place of Business Mailing Address 780 GLORIA DR **780 GLORIA DR** JACKSONVILLE FL 32221 JACKSONVILLE FL 32221 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3752 150 Applied For Not Applicable - Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Correct Name = Sharpe SHARE, ROBERT Street Address (P.O. Box Number is Not Acceptable) 780 GLORIA DR JACKSONVILLE FL 32221 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 famillar with, and accept the obligations of registered age 8-12-200Z SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE President Delete TITI F ☐ Change ■ Addition Robert Sharpe 780 Gloria Drive MAME NAME STREET ADDRESS CR2E034 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Celete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete IME ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

Sharpe 7-30-2002

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Sharpe Designs, Inc.

780 Gloria Drive Jacksonville Florida 32221

> P01000103980 123969

July 30, 2002

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Sir or Madam:

Having been out of town for a few weeks, I have only now discovered a notice to file a 2002 Uniform.

Business Report with a fee of \$550. To my knowledge, this corporation did not receive a first notice.

Just filling as a new corporation lasts October 25; I am new and learning much about the operation and requirements of a corporation. I have called the Division of Corporations and was directed by an its Officer to submit this letter explaining my situation. I did not intend to be late to file and plea that it is acceptable to pay the original fee amount of \$150.00. Your helpfulness and consideration are greatly appreciated.

Sincerely,

Robert Sharpe President

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