## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Sep 17, 2002 8:00 am Secretary of State

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DOCUMENT # P01000105119  1. Entity Name				Secretary of State 09-17-2002 90098 018 ***150.00		
MPD WOLF INC.			V			
DO NOT WRIT	E IN THIS S	SPAG	E			
2. Principal Place of Business 5181 NE 18th av	3. Mailing Address same as principal					
Suite, Apt. *, etc. # 4	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State Fort Lauderdale, FL  City & State				4. FEI Number 651156385		Applied For Not Applicable
Zip Country 33334-5741	Zip	Zip Country		5. Certificate of Status Desired		.75 Additional
		and one of		7. Name and Address of Current R		
DO NOT WRITE			Name Dvoral	k, Michal		
IN THIS SPACE			_Street Address (P.O., Box, Number is Not Acceptable)			
			5881 NE 18			
			City Fort Lauderdale FL Zip Code 333334			Zip Code 33334
8. The above named entity submits this statement for SIGNATURE  Signature, typed or priced name of registered agent	$\overline{\mathcal{D}}$		d office or registers	•	da. 9/11/02	/
9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  11. OFFICERS AND	January 1: After Ma Amend Make Check Pay	May 1 Fe iy 1 Fee is led UBR is able to De	e is \$150,00 : \$550,00 : \$61:25 partment of Stat	10. Election Campaign Finan	ncing	\$5.00 May Be Added to Fees
TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TO OFFICERS AND  OFFICERS AND  OFFICERS AND  TO OFFICERS AND  OFFICERS A	DIRECTORS	-				CR2E0348 (12/01)
nitle Name Street address City-St-Zip		NAME STRUE	ACCRESS:			CRZEG
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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 it 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 analysis of the corporation of the corporation of the receiver or trustee empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY ST ZP

TITLE TO STREET ABORESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

Dana Tiverova

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/02 (954) 684-7934

Date

Daytime Phone #

Backto Picca I

Ūale.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AHachment 678233 # POI DOD 105 119 FEBRUARY 17, 2002

TO: UBR

DIVISION OF CORPORATIONS TALLAHASSEE

Please be advised that: MPD Wolf Inc. is hereby notifying your department of address change for the above company.

New address is: MPD Wolf, Inc.

- 5181\_NE\_18th AVE

Fort Lauderdale, Fi 33334

Thank you for your time to correct the address.

Cordially,

Michai Dvorak Registered Agent

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Attachments

September 11, 2002

H\_001000105119/678233

To

Department of Uniform Business Report

**Division of Corporations** 

From: MPD Wolf Inc.

Michal Dvorak Registered Agent

5181 NE 18th Ave, Fort Lauderdale, FL 33334

Tel: 954-415-8588

To whom it may concern

We would like to respectfully request the waiving of the additional fee based on the fact that the firm had a change of address in January 2002, we notified your department by mail on February 17, 2002 (copy attached) about the change of address.

We had not received the first notice probably because of the address mix up. Please note that on the original UBR form (copy attached) the address is different from our mailing address, which was correct on this notice (copy attached).

Thank you beforehand for reviewing our request and please take in consideration that our company is not yet operationally functional at his time (no big profits yet).

Thank You again Cordially

Michal Dvorak

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