

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92204 032 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

80111619

DOCUMENT # P01000120420			
1. Entity Name ISSENTIA, INC.			
Principal Place of Business 49 JUSTIN DR. APOPKA, FL 32712-2389		Mailing Address 49 JUSTIN DR. APOPKA, FL 32712-2389	
2. Principal Place of Business 1372 Holly Glen Run Suite, Apt. #, etc.		3. Mailing Address 1372 Holly Glen Run Suite, Apt. #, etc.	
City & State Apopka FL		City & State Apopka FL	
Zip 32703		Country USA	
4. FEI Number 30-0000335		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent KUCZYNSKI, JOHN 49 JUSTIN DR. APOPKA, FL 32712-2389			
7. Name and Address of New Registered Agent Name John Kuczynski Street Address (P.O. Box Number is Not Acceptable) 1372 Holly Glen Run City Apopka FL Zip Code 32703			
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 <u>John Kuczynski, President</u> DATE <u>4-25-03</u> <small>(Signature, typed or printed name of registered agent and date of filing) (NOTE: Registered Agent's signature required when submitting)</small>			
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 <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST KUCZYNSKI, JOHN 49 JUSTIN DR. APOPKA, FL 32712-2389	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FULLER, ERIC 800 HONEYSUCKLE LN. MONTEVALLO, AL 351158838	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1372 Holly Glen Run Apopka FL 32703	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: <u>John Kuczynski, President</u> DATE <u>4-25-03</u> <small>(Signature and typed or printed name of signing officer or director)</small>			