FILED Sep 08, 2003 8:00 am Secretary of State

## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

DOCUMENT # P02000 1. Entity Name United Investment	09-08-2003 90315 045 ***150.00				
DO NOT WRITE	IN THIS SE	PACE			
2. Principal Place of Business 5.4.6.0 1/2 Stoto W.7	3. Mailing Address 5460 W.	State Rd 7			
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State Land, Floreda	City & State	d House	4. FEI Number 30 - 00 29	221 Applied For Not Applicable	
Zip Country	33319	Country A	5. Certificate of Status Desired	\$9.75 Additional	
	1 / 1		7. Name and Address of Current Registered Agent		
DO NOT WOITE		Name Cou	rul ByThe		
IN THIS SP	CONTRACTOR CONTRACTOR CONTRACTOR	Stréet Address	(P.O. Box Number is Not Acceptate	yle)	
		City Z	toud	FL Zip Code	
8. The above named entity submits this statement to the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent.	- PAUL	registered office or register BLY 1/1/E Registered Agent signature require		9.1.03	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of	alan Chranton did.		9. Election Campaign F Trust Fund Contributi	+ + + + + + + + + + + + + + + + + +	
TITLE PULSUIFERN AND STREET ADDRESS CITY ST. ZIP  OFFICERS AND  PULSUIFERN  BULL Blytto  STREET ADDRESS  CITY ST. ZIP  Fort Carry  T	Directors  333//	TITLE NAME STREET ADDRESS CITY-ST-ZIP		34B (12/02)	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Weston  THE PRESIDENT CONTROL OF CO	nd Director Xi Lile Dr. 2 33327	TITLE MAME STREET AUDRESS CITY_ST-ZIP	The second secon	CR2E034B	
TITLE NAME STREET ADDRESS CITY-ST-ZIP  THE FIRST SECRET  FIRST  THE SECRET  TH	she Dr. 33327	> TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT	WRITE-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS	SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee emp attachment with an address, with all other like em	true and accurate and that my owered to execute this report	v signature shall have the	same legal effect as if made under	rigath: that I am an officer or director	

\$6145905 # PO 200200 7490

## UNITED INVESTMENT & DEVELOPMENT CORP.

September 5, 2003

Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Dear Sir/Madam,

## Re: Uniform Business Report

The subject report was not filed on time with your office due to the fact that we did not receive from your office the relevant information required to file same on time. This unfortunate situation came about as a result of our offices being relocated to the address at the bottom of our letterhead, whereas the information was apparently mailed to our old address and not forwarded to our new address.

We ask that any late fees that may be applied as a result of this delay be waived.

Your assistance is greatly appreciated.

Sincerely yours,

Paul Blythe PRESIDENT

Postal address: 5460 N. State Rd. 7, Suite 217, Fort Lauderdale, FL 33319 Phone: (954) 733-9100 Fax: (954) 731-9990

E-mail: blythcp@bellsouth.net