2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1/13

FILED Feb 18, 2003 8:00 am Secretary of State

DOCUMENT # P0200 1. Entity Name WHATWATT INC.		0200005	4569			01-13-2003 90648 021 ***150.00	
1167 HILLSBO SUITE 711	ace of Business IORO MILE BEACH FL 33062	1167 Suite	Mailing Address 1167 HILLSBORO MILE SUITE 711 HILLSBORO BEACH FL 33062				
2. Principal F	Place of Business	3. Mai	3. Mailing Address			I IZBANDOL HI BOKIO KIRIK DANIK DANIK BONIK BONIK BINDI AKINK BINDI DANIK DANID NAKI KARI	
Suite, Apt.			ite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES	
City & Stat	ıte	City	y & State		4. 1	FEI Number Applied For Not Applicable	
Zip	Country	Zip		Country	5.	5. Certificate of Status Desired	
	6. Name and Address	of Current Registers	ad Agent	Mana	7. 1	Name and Address of New Registered Agent	
GERHARI	DT, MARK	التراسيات والمحاكم والمتعدد والمتعدد		Name			
	LSBORO MILE			Street Address		3ox Number is Not Acceptable)	
SUITE 711	11						
HILLSBOP	RO BEACH, FL FL 33062	<u>;</u>				FL 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 familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					BQUREOU W.I.	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.		ICERS AND DIRECTOR		11,	AD	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOLLWOOD FL 33020		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition Change Addition Change Addition Change Addition Change Addition Change	
	V GERHARDT, MARK 1167 HILLSBORO MILE HILLSBORO BEACH FL		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition 🕏	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Detele	TITLE NAME STREET AODRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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12. I hereby c	ertify that the information su	pplied with this filing c	does not qualify for the	exemption stated	in Section 1	19.07(3)(i), Florida Statutes. I further certify that the information	

nd accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trustee empowered changed, or on an attachment with an address, with all