The long of

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

	NIFORM BUSINE		FILED							
DOCUMENT # P02000060506						ITE	:D			
1. Entity Name MHM NATIONAL, INC.				4	03 A	lug-1 A				
			1,33		SECO	· · · · · · A	n II: 04			
Principal Plac	ce of Business	Mailing Address			TALLA	ETARY OF HASSEE,	STATE			
6326 RAVEN		6326 RAVENWOOD WAY				rraste,	FLORIDA			
SARASOTA, F	L 34243	SARASOTA, FL 34243								
									i i	
2. Principal Place of Business 2300 BE RUDGE RD. 3. Mailing Address 2300 BE R			2,065 80	۵.		11 00 11 00 11 00	1146 146 1 46 1	HIL BRING BIN 188		
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City 8 Sta	F301	City & State			4. EEI Number Applied For					
SA	RASOIA FZ	SARASOTA	12		61-141587	5		Not Applicable	-	
Zip P43	239 Country A	34239	Country A	.	5. Certificate of Status	Desired §	\$8.75 A Fee Requ			
	6. Name and Address of Curren				7. Name and Address	of New Regis			7	
CHERP, RONALD M				Name CAROL UNN MONVILLE CPA						
3859 BEE RIDGE ROAD SUITE 101			Street	Address (P	O. Box Number is Not	4cceptable)	#30			
SARASOTA, FL 34233				<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3		<u></u>	1	
			CITY	Arts			FL Zip C	ode 3 9	1	
The above named entity submits this statement for the purpose of changing its register				or registere	d agent, or both, in the	State of Florida.		339 h, and accept	-	
the obligat	tions of registered agent.	:11 c .							}	
SIGNATURE	Signature, typed or primed name of registered agen	WIIS.	egistered Agentsigna	r beniuper enut	Man minstaling)		DATE			
FILE NOW!!!\FEE\B \$150.00									1	
After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.25					9. Election Car Trust Fund (mpaign Financir Contribution.		. 00 May Be ed to Fees		
Nake Check	k Payable to Florida Department OFFICERS AND		11,		ADDITIONS/CHANGE	S TO OFFICER	C AND DIDECTO	De IN 44	4	
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NAME	MOORE, KANDY L	,	NAME	CARC	of Gee Ridge	svice でも、井o	301		100	
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NAME		- John Co	NAME				Onesign	Addition		
STREET ADDRESS 1			STREET ADDRESS City-St-21P							
12. I hereby o	certify that the information supplied with	n this filing does not qualify for the	e exemption sta	ted in Sect	tion 119.07(3)(i), Florida	Statutes. I furth	er certify that the	information	1	
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 directions like empowered.										
		with allower like empowered.						2.07		
SIGNAT		PRINTED NAME OF SIGNING OFFICER OR	MOECTON		<u></u>	1-03	941-921 Ozyrima Phona a	royo	1	

MHM NATIONAL, INC. 2300 BEE RIDGE ROAD, SUITE 301 SARASOTA, FL 34239

Florida Department of State Division of Corporations Tallahassee, FL

Re: MHM NATIONAL, INC.
Document # P02000060506

To Whom It May Concern:

This is a formal request for an abatement of \$400 penalty for late filing of the above referenced corporation. The primary address for this corporation was moved and I never received and thus did not respond to the original Uniform Business Report. Also, my previous registered agent and Certified Public Accountant passed away last year and I have had to make changes as such which are on the Business Report.

Thank you for your time and consideration in this request. Please let me know your decision as soon as reasonably possible.

Very truly yours,

Carol Lynn Monville President/Director