FILED

2003 FOR PROFIT CORPORATION

Sep 08, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT AUBR P02000082943 DOCUMENT # 09-08-2003 90135 013 ***150.00 1. Entity Name ISMU ENTERPRISES INC Principal Place of Business Mailing Address 3408 TIMBERWOOD CIRCLE 3408 TIMBERWOOD CIRCLE NAPLES FL 34105 NAPLES FL 34105 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For Not Applicable 57-1149266 Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **CORPORATION-SERVICE COMPANY** ss (BO. Box Number is Not Acceptable) 1201 HAYS STREET Timberwood TALLAHASSEE FL 32301 Zin Code Naples 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. Munroe president FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee, will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Change Addition Delete ISAZA, TERESA NAME NAME 3408 TIMERWOOD CIRCLE STREET ADDRESS STREET ADDRESS NAPLES FL 34105 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition ☐ Change TITLE TITLE MUNROE, JOHN NAME NAME 3408 TIMBERWOOD CIRCLE STREET ADDRESS STREET ADDRESS NAPLES FL 34105 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE [7] Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition

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 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

NAME

STREET ADDRESS

CITY-ST-ZIP

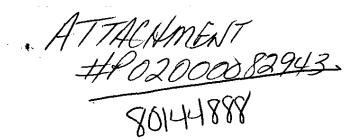
NAME

STREET ADDRESS

CITY-ST-7IP

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August 17, 2003

Division of Corporations Uniform Business Report Fillings P.O. BOX 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

We are requesting a waiver of the late fee for filing of our 2003 Uniform Business Report since we did not receive the prior notice.

Please find the enclosed filing fee of \$150.00.

Sincerely,

John Munroe President

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CONTRACTOR CONTRACTOR CONTRACTOR