

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90262 037 ***150.00

DOCUMENT # P02000084461	
1. Entity Name	
ACCOUNTING MADE "e-Z", INC.	

DO NOT WRITE IN THIS SPACE

44026062

2. Principal Place of Business 3800 S. OCEAN DRIVE		3. Mailing Address	
Suite, Apt. #, etc. #216		Suite, Apt. #, etc.	
City & State HOLLYWOOD, FL		City & State	
Zip 33019	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 14-1842461			Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
	7. Name and Address of Current Registered Agent			
	Name ADRIAN MULKO			
	Street Address (P.O. Box Number is Not Acceptable) 3800 S. OCEAN DRIVE #216			
		City HOLLYWOOD	FL	Zip Code 33019

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 ADRIAN MULKO 4-1-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
Trust Fund Contribution.

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NATALIA MULKO 3800 S. OCEAN DRIVE #216 HOLLYWOOD, FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ADRIAN MULKO 3800 S. OCEAN DRIVE #216 HOLLYWOOD, FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. 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 on an attachment with an address, with all other like empowered.

SIGNATURE: ADRIAN MULKO 4/1/2004 954-927-3303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #