2003 FOR PROFIT CORPORATION

Aug 05, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR P02000120104 DOCUMENT # 08-05-2003 90073 003 ***150.00 1. Entity Name CECILE N. KAPLAN, INC. Principal Place of Business Mailing Address 9620 NW 52ND PLACE 9620 NW 52ND PLACE CORAL SPRINGS FL 33076 CORAL SPRINGS FL 33076 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. K CHECK HERE IF MAKING CHANGES City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NOFIL INVESTMENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 2011 SOUTH PERIMETER ROAD SUITE C FORT LAUDERDALE FL 33309 City 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. DATE (NOTE: Registered Agent signature required when reinstating) 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 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSTD** TITLE TITLE Change Addition ☐ Defete KAPLAN, CECILE N NAME NAME 9620 NW 52ND PLACE STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME

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 Block 11 if changed, or on an attachment with an address, with all other like empowered

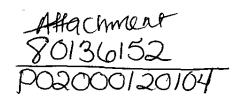
STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-7IP



CECILE N. KAPLAN, INC. 9620 NW 52ND PLACE CORAL SPRINGS, FL 33076

July 30, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Waiver of 2003 Uniform Business Report Penalties-

Gentlemen/Ladies:

Enclosed please find the 2003 For Profit Corporation Uniform Business Report (UBR) for Cecile Kaplan, Inc., Document #P02000120104 Also enclosed is a check for \$150 made payable to the Division of Corporations which represents the 2003 annual filing fee.

I am the President, Secretary, Treasurer and sole director of this company. I hereby certify that the corporation never received the prior notice requesting that it file its 2003 Uniform Business Report. Additionally, the corporation has never changed its address since its inception in 2002. Therefore, on behalf of the corporation, I respectfully request that the Division of Corporations waive the \$400 late filing penalty.

Thank you for your prompt attention to this matter.

Sincerely,

Cecile Kaplan

President

Cecile N. Kaplan, Inc.