## 2003 FOR PROFIT CORPORATION

## **FILED** Mar 27, 2003 8:00 am Secretary of State 03-10-2003 90727 017 \*\*\*150.00

UNIFORM BUS	SINESS REPORT	(UBR)	31.
DOCUMENT # PO I. Entity Name SCOOTER GUY ONLINE, INC	•		
Principal Place of Business 1210 S.E. 5TH STREET DEERFIELD BEACH FL 33441	Mailing Address 1210 S.E. 5TH STREET DEERFIELD BEACH FL 33441		J (8 6 il)
Principal Place of Business	3. Mailing Address		

Pincipal Place of Business  1/10 & E. SM DIRECT DEERFIELD BEACH FL 50441  2. Principal Place of Business  Suite. Apr. F. etc.  Suite. Apr. F. etc.  Suite. Apr. F. etc.  Suite. Apr. F. etc.  City & State  E. Name and Address of Current Registered Agent  Name  Name  Name  Name  Name  Name  State Address of Non-Acceptables  State Address of Non-Acceptables  City & State  City & St	SCOOTER GUY ONLINE, INC.						)				
Sulfe, Apt. #, etc.   Sulfe, Apt. #, etc.   Chy & State   A. FEI Number of Status Desired   Applied For   Not Applicable   Not Applicable   See   Applied For   Not Applicable   See   Applied For   Not Applicable   See	1210 S.E. 5TH STREET 1210 S.E. 5TH STREET				A GURANDON INI RRIND INGNY BRING BAGIN BRING		(1407 (1 <b>3</b> 74 (				
City & State  Country  Country  Country  Country  Country  Country  End of Additions of Country  End of End o	2. Principal P	Mace of Business	3. Ma	iling Address				1 ( <b>10</b> 11/101   11 <b>10</b> 11/1 11011   00111   00111   00111			
Zip Country Zip Country 5. Certificate of Status Desired   \$6.75 Additional   \$6.75 Addit	Suite, Apt.	#, etc.	Sui	te, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
E. Name and Address of Current Registered Agent  F. Name and Address of New Registered Agent  F. Name and Address of New Registered Agent  NAPOLI, SALVATORE  1210 S.E. 5TH STREET  DEERFIELD BEACH FI, 33441  Cay  City  FL  Zip Code  Cay  Cay  FL  Zip Code  Cay  FL  Zip Code  Cay  Cay  Cay  FL  Zip Code  Cay  Cay  FL  Zip Code  Cay  Cay  Cay  FL  Zip Code  Cay  Cay  Cay  Cay  Cay  Cay  FL  Zip Code  Cay  Cay  Cay  Cay  Cay  Cay  Cay  FL  Zip Code  Cay  Cay  Cay  Cay  Cay  Cay  Cay  Ca	City & Stat	6	City	& State	_			4. FEI Number 03-0489974		<del></del>	
NAPOLL SALVATORE  1210 S.E. 5TH STREET  DEERFIELD BEACH FL. 33441  Cay FL Zip Code  8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Plorida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    File NOWIII FEE IS \$150.00	Zip	Country	Zip	· · · · · · · · · · · · · · · · · · ·	Cour	ntry	5.	Certificate of Status Desired			Ų
NAPOLI, SALVATORE 1210 S.E. 5TH STREET.  DEERFIELD BEACH FL 33441  City FL Zip Code  8. The above named criply submits this esterment for the purpose of changing its registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature receive present come of registered agent.  (NOTE Required Agent signature received agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent.  FILE NOWILL FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Chack Psyabble to Finded Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  NAME  NAME  NAPOLI, SALVATORE  SIRES ALORES  DITY 51- 2P  TITLE  NAME  SIRES ALORES  DITY 51- 2P  TITLE  NAME  SIRES ALORES  DITY 51- 2P  TITLE  NAME  SIRES ALORES  CITY 51- 2P  TIT		6. Name and Address of Curren	t Register	ed Agent			7.	Name and Address of New Register	ed Agent-	-	
1210 S.E. STH STREET  DEERFIELD BEACH FL 33441  City FL Zip Code  8. The above named dright submits this statement for the purpose of changing its registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Rorida.  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$55,00  Make Chack Payable (or Fices AND DIRECTORS IN 11  TILE  NAME  NAPOU, SALVATORE  SIREET ADDRESS  OITY-ST-2P  TILE  NAME  SIREET AD		ومعالم والمعالم والم	<u></u>		د بعد	Name		<u> </u>			
E. The above named chity, 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 or registered agent.  SIGNATURE  SIGNATUR		•				Street Address	(P.O. E	Box Number is Not Acceptable)			
City 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 lamiliar with, and accept the obligations of registered agent.  SIGNATURE  S		7 7				[ <del></del>			·		
R. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATUR	DEERFIEL	D BEACH FL 33441									
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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		ertify that the information connline with	h this filles	rices fol qualify for			ction :	110 07/31/i) Florido Statutas I funba-	cortifu that t	no informa	tion

of the corporation or the receiver or trusted implemental report is frue and according to the exemption stated in section 119.0/(3)(i), Profide Statutes. I further certify that the information indicated on this report or supplemental report is frue and according to 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 trusted implemental to export 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 living all other life employeed.