ps 1 7 7

2003 FOR PROFIT CORPORATION MAR -15 PM 3: 15 **DOCUMENT # P02000133589** 1. Entity Name ZURTEN CONSULTING, INC. REINSTATEMENT DISY Principal Place of Business Mailing Address 1333 SE 17TH ST. 1333 SE 17TH ST. OCALA, FL. 34471 OCALA, FL 34471 2. Principal Place of Business 4818 SE 113 Mailing Address 4818 SE 11 PLACE Suite, Apt. #, etc. X CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State City & State Not Applicable COUNTY 15A \$8.75 Additional Fee Required 5. Certificate of Status Desired s of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. Street Address (P.O. Box Number is Not Acceptable) 4TH FLOOR MIAMI, FL 33145 Zip Code A. 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 (NOTE: Reviewed Autor signature received when 9. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. (10/02) Oelete TITLE TITLE. NAME KNETTLES, ARLINA C HALAF 4818 SE 111 PLACE 1333 SE 17TH ST. STREET ADDRESS STREET ADDRESS OCALA, FL 34471 CRY. ST. 22P CITY-ST-ZP Change Addition VSD TITLE ☐ Delete TITLE KNETTLES, JOHN M NAME 4818 SEILL PLACE STREET ADDRESS 1333 SE 17TH ST. 223000A T330T2 CITY-ST-ZP Ocala Fl OCALA, FL 34471 COY-ST-ZIP Addition | TOLE TITLE Ockte MANA NAME STREET ADDRESS STREET ADDRESS CRY-ST-ZIP CITY-ST-ZP Addition 🔲 Change TOLE: --- Delete --TIRLE \*\*\* HAME STREET ADORESS STREET ADORESS CAY-ST-ZIP CITY-ST-ZP Addition Delete TOLE ☐ Change TITLE KALE HALE STREET ADDRESS STREET ADDRESS COV-SI-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TIFLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZIP CITY-53-2P 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Floride Statutes, I further certify that the information indicated on this report or suppliemental 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 507, 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. SIGNATURE:

September 5, 2003

Re: Document # P02000133589 Zurten Consulting, Inc.

To Whom It May Concern:

We moved our corporate office, forwarded all our mail and never received either of the two (2) notices for renewal of our Uniform Business Report. Had either notice been received we would have made payment immediately.

Please waive the \$400.00 late fee and accept our \$150.00 renewal.

Thank you for your help and consideration.

Regards,

Vice President