

Jul 23 04 03:26p


Barry Pollo

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**FILED**  
**Aug 05, 2004 8:00 am**  
**Secretary of State**

07-14-2004 90002 006 \*\*\*150.00

**2004 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

<b>DOCUMENT # P03000097396</b>			
1. Entity Name <b>DIVERGENT THINKING INC.</b>			
Principal Place of Business 2625 WINDHAM CT DELRAY BCH, FL 33445		Mailing Address 2625 WINDHAM CT DELRAY BCH, FL 33445	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>90-0112080</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>POLLOCK, BARRY</b> <b>2625 WINDHAM CT</b> <b>DELRAY BCH, FL 33445</b>		Name Street Address (P.O. 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 familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when not standing)</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	D <b>POLLOCK, BARRY</b> <b>2625 WINDHAM CT</b> <b>DELRAY BCH, FL 33445</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.			
SIGNATURE: <i>X Barry Pollo</i>		<i>X 7/10/04 5615811323</i> Date Date	

66431395



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Jul 23 04 03:26p

Barry Pollo

561-637-3440

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 20, 2004

DIVERGENT THINKING INC.  
2625 WINDHAM CT  
DELRAY BCH, FL 33445

SUBJECT: DIVERGENT THINKING INC.  
Ref. Number: P03000097396

*Handwritten notes:*  
Fred  
NOW WHAT??  
ASUP  
Barry  
7/23  
2/25/05

We have received your document for DIVERGENT THINKING INC. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The only provision for waiver of the \$400.00 late fee is due to non-receipt of the first notice annual report. Your letter does not state this.

The fee to file the profit annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00. If a certificate of status is desired, please add an additional \$8.75

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800)829-1040.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner  
Senior Section Administrator

Letter Number: 104A00045863

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

*Attachment*  
*66431395*  
FREDRIK S. LIPPMAN, CPA, PA  
Certified Public Accountant

WACHOVIA BANK BUILDING  
3325 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FLORIDA 33021  
(954) 961-5400  
FAX (954) 961-5478

MEMBER  
AMERICAN INSTITUTE OF  
CERTIFIED PUBLIC ACCOUNTANTS  
FLORIDA INSTITUTE OF  
CERTIFIED PUBLIC ACCOUNTANTS

August 2, 2004

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

REF: Divergent Thinking, Inc.  
2004 For Profit Corporation Annual Report  
Document Number: P03000097396

Gentlemen:

Enclosed is a Copy of your letter dated July 20<sup>th</sup>, 2004 and a Copy of 2004 For Profit Corporation Annual Report for Divergent Thinking, Inc.

The Corporation ID# is entered in Block 4.

The Taxpayer formed this corporation in 2003, and is inexperienced in business matters. He forwarded his Annual Report to us totally unaware as to what the form was, along with an attached note stating 'for your reference.' We mistakenly assumed he had filed the return. He assumed (because of his lack of experience) that we had taken whatever action was needed.

On behalf of the Taxpayer we respectfully request, that in light of (1) Taxpayer's inexperience, (2) his attempt to comply (based on his limited experience), and (3) the misunderstanding with us that the penalty of \$ 400.00 be waived and the document be accepted as filed.

Thank you for your consideration of this matter.

Very truly yours,

*Fredrik S. Lippman*  
Fredrik S. Lippman  
Certified Public Accountant  
FSL:era  
Enclosures  
CC: Divergent Thinking, Inc.