FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Kathe ne Hsais

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P94000003779

1. Corporation Name

1 Squared INC.

May 17, 1999 8:00 am Secretary of State

05-17-1999 90074 025 ***150.00

Suite Apt. #, etc. Suite, Apt. #, etc.	Principal Place of Busine	ess	Mailing Address				
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2. Principal Place of Business 21 Lo O Subset 28 Mailing Address 4. FSI Number 999 That Applies 79 That Appl	l				DO NOT WRITE IN THIS SPACE		
Suite Act #, etc. Suit	Ocasa, FL 34444				3. Date Incorporated or Qualifed		
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Suite Apt # etc. 27		1) I PAVE	<u> </u>		19991		t Applicable
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City & State Ci	22 Back	FL			5. Certifcate of Status Desired		
23 24 34 34 35 35 35 35 35 3		, –			6. Election Campaign Financing	\$5.00	May Be
24 CUT SE USA 29 30 B. This corporation owes the current year Intanaphie Personal Property Tax. USA 9. Name and Address of Current Registered Agent Policy Fig. 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. City Fig. 85 Zip Code 14. Pursuant to the provision of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, I am familiarly with, and accept the option/ons of. Section 607.0505, Florida Statutes 14. City Fig. 85 Zip Code 15. City Fig. 85 Zip Code 16. City Fig. 85 Zip Code 16. City Fig. 85 Zip Code 17. Pursuant to the provision of Sections 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, I am familiarly with, and accept the option/ons of. Section 607.0505, Florida Statutes 17. Pursuant to the provision of Sections 607.0505, Florida Statutes 18. City Fig. 85 Zip Code 19. Code of City Fig. 85 Zip Code 19. Code of City Fig. 85 Zip Code 10. City Fig. 85 Zip Code 11. Pursuant to the provision of Sections 607.0505, Florida Statutes 11. Pursuant to the provision of Sections 607.0505, Florida Statutes 12. City Fig. 85 Zip Code 12. Code of City Fig. 85 Zip Code 12. Code of City Fig. 85 Zip Code 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. City Fig. 85 Zip Code 15. Title	23				, , ,		•
9. Name and Address of Current Registered Agent Color Col		Country	-Zip	Country	8. This corporation owes the current year	Intangible	
Register		/	<u> </u>	30	Personal Property Tax.	∭ Yes	□No
Signature Sign	9. Nam	e and Address of Current	Registered Agent	1	10. Name and Address of New Registere	d Agent	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent, and the provisions of Sections 607,0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as register agent, and the provision of Section 607,0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as register agent, and the provision of Section 607,0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as register agent, and the provision of Section 607,0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as register agent, and the provision of Section 607,0505, Florida Statutes, the corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the objections. Statutes, the corporation submits this statement for the purpose of changing its register agent. I all for the purpose of changing its register agent. I all for the purpose of change agent. I all for the purp	D.1.14	1) 14,00	•	81 Name			
## City ## Cit	ROBERT	R. Hugh	S	82 Street Add	dress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the objections of Section 607,0505, Florida Statutes. SIGNATURE SIGN	1601 Su	J 18 Ave	-	83			
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered pagent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agreement and statement of the purpose of changing its registered pagent. I am family with, and accept the objection 607,0505, Florida Statutes. SIGNATURE SIGN	ruccia 1	FL Pyun	4	84 City		85 Zin C	ode.
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am farmfair with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE NAME POSICIAL & SIGNATURE 12. NAME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I 1.1 TITLE Change Change Change Change Change TITLE VICA PRIS. STREET ADDRESS STITLE DELETE 2.1 TITLE Change Change TITLE DELETE 3.1 TITLE Change Change TITLE DELETE 3.2 NAME 3.3 STREET ADDRESS STITLE Change ACTIV-ST-ZP TITLE DELETE 3.1 TITLE Change ACTIV-ST-ZP TITLE DELETE 3.1 TITLE Change ACTIV-ST-ZP TITLE DELETE 3.1 TITLE Change 4.1 TITLE Change TITLE DELETE 3.3 STREET ADDRESS CITY-ST-ZP TITLE DELETE 3.4 CITY-ST-ZP TITLE Change ACTIV-ST-ZP TITLE DELETE 3.4 CITY-ST-ZP TITLE Change	ارساسی ا	0 1 1 1	,	City	F	L S Z P	530
Signature Typed or printed name of for flowing general and talle if applicable (NOTE: Respitations required when reinstating) DATE	office or registered a agent. I am familiar	agent, or both, in the State of	f Florida. Such change was au	ithorized by the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	or changing its roointment as reg	registered jistered
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CITY-ST-ZIP 64 CITY-ST-ZIP 14. 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		he information conclined with	this filing does not qualify for		Section 119 07(3\(i\)) Florida Statutas I further o	ertify that the in	formation
indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.	indicated on this ann	ual report or supplemental a	innual report is true and accur	ate and that my signatur	e shall have the same legal effect as if made un	nder oath: that I	am an

SIGNATURE:

ED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)