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TRI-NET MARKETING INC.						010CT 15 PH 4:31				
Principal Place of Business Malling Address						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
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GAINESVILLE, FL. 11 NW 101 CT										
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			356	27						
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc. FC 32607						. سدد	
Suite, Apt.	#, etc. 		— Suite, Apr. 4, etc. (-C 3 2 Ce 7			02/06/0	).I_90Z9	1-7-031	_\ <b>2</b> > ( {	5000
City & State			City & State			4. FEI Number				olied For
GALMESVILLE			GAINBYILE FL			59383	<u> 3684</u>			Applicable
Zip		Country	Zip	Countr	-	5. Certificate of \$	Status Desired		8.75 Addi	
3560	7	US	32607	<u></u>	>	7. Name and Ad			e Required	<u> </u>
6. Name and Address of Current Registered Agent Name						7. Italia alla Pa	41033 01 11017 11	vg.0.0.0.		
Gary Schneider  11 n.w. 101 Court  Mana  Street Addres						s (P.O. Box Number is	Not Acceptable	,	-	
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11 41.00 Th th 23407					•					
Vainesville, FL 32407				-	City			FL	Zip Code	
8 The shove	named entit	v submits this statement fo	r the purpose of changing its	registere	d office or regist	stered agent, or both, i	n the State of Flo	rida.	•	
<b>4</b> ,		<b>,</b>		-						
SIGNATURE .										
	Signature, types	or printed name of registered agent	and title if applicable. (NOTE	- Demistered	Agent signature requi	ared when reinstating)		DATE		1
					And A comment of the					
9. This corpo	oration is elig	gible to satisfy its Intangible	FILE NOW!	II PEE		10 Electic	on Campaign Fin	ancing	\$5,0	0 May Be
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13. I hereby certify that the information supplied with this filling does not quality 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 frue 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352 332 6119

## DO NOT REMOVE!



Schneider Enterprises

6900 S.W. 78th Street, Gainesville, Florida 32608 • (352) 371-9301 • Fax (352) 371-2603 • Voice Mail (352) 337-7110

October 3, 2001

To Whom It May Concern:

Attached please find a 2001 Uniform Business Report (UBR) for Tri Net Marketing. I am requesting that the \$600.00 late fee be waived as on-time payment was mailed, and the \$150.00 was cashed by the Department of state, well before the deadline. The completed UBR form was not mailed in at the time I mailed in payment because I never received this form. When I was informed that I needed this form, I called to request it on September 25. As of October 2, I still had not received so I called again and was told that I could down load it from your website which I have done and enclosed along with a \$8.75 check for a Certificate of Status.

I appreciate your attention to the matter.

Thank you,

Gary Schneider