FOR PROFIT CORPORATION
NIFORM BUSINESS REPORT (UBR) W020000610 FILED DOCUMENT # P95000001394 02 APR -3 AM 8: 25 Art David Enterprises, Inc. SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address Wavelight Digital Images Art David Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 99 W. Plan-14138 Lake Tilden Blud City & State City & State 4. FEI Number Applied For <u>Winter Garden</u> <u>Winter Garden</u>, Fl <u>59-329231</u> Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 34787 <u>ush</u> USA Fee Required 7. Name and Address of Current Registered Agent DO-NOT-WRITE IN THIS SPACE inter 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. ES I DRINT SIGNATURE (NOTE: Registered Agent signature required when reinstation) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After May 1, Fee is \$550.00 Tax filing requirement and elects to do so. \$5.00 May Be Amended UBR is \$61.25 (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ****765.00 *****765.00 (15,00) TITLE TITLE NAME Arthur K. David NAME 14138 Lake Tilden Bird. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Winter Garden, Fl 34787 TITLE TITLE Pauline C David NAME NAME 14138 Lake Tilden Blvd. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Winter Garden, F1 34787 CITY-ST-ZIP TITE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-7/P CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS 500005315795 CITY-ST-ZIP CITY-ST-ZIP -04/22/02 -01133--002 TITLE TITLE **]******150.00 ****150.00 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P 13. I hereby certify that the information supplied with this filling 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 11 or on an attachment with an address, with all other like empowered. ME OF SIGNING OFFICER OR DIRECTOR



December 26th, 2001

Division of Corporations

Amendment Filing Section

PO Box 6327

Tallahassee, FL

32314

Ladies and Gentlemen,

As I applied for a local business license, I was shocked to uncover that I my corporation has been dissolved since 1997! I have no explanation for this as yet, but I can assure you that I never received any notification of impending danger of dissolution. I am trying to move quickly to resolve the situation so I am enclosing a check for \$765 to restore my company with the state and a check for \$150 to cover the year 2002. Please contact me if I need to do anything further. Please check my address to make sure it is the on you have on file for my company.

Sincerely,

Art David

President,

Art David Enterprises, Inc. 14138 Lake Tilden Blvd.

Winter Garden, FL

34787

Wavelight Digital Images, Inc. 14138 Lake Tilden Blvd. Winter Garden, FL 34787 407-877-2091 www.wavelight.com