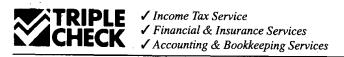
MARIO **S AT THE E  Principal Place of Business  1830 South 3rd Street Jacksonville Beach, FI  2. Principal Place of Business  Suite, Apt. #, etc.  City & State	Mailing Address 1830 South 3	Brd Street Beach, FL 3225	OI DEC 12	COFSTALL ORPORATIONS PM 12: LO
1830 South 3rd Street Jacksonville Beach, FI  2. Principal Place of Business  Suite, Apt. #, etc.	1830 South 3 32250 Jacksonville			PM 12: 10
Suite, Apt. #, etc.	3. Mailing Address		ou 	
·				
City & State	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
	City & State		4. FEI Number Applied For 59 – 3295706 Not Applicable	
Zip Country	Zip	Country	5. Certificate of Status Desired	Fee Required
	of Current Registered Agent	Name	7. Name and Address of New Regist	tered Agent
Modica, Maria L. 55 East Dolphin Boulevard Ponte Vedra Beach, FL 32082		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 regist	ered agent, or both, in the State of Florida.	
SIGNATURE Signature, typed or printed name of	registered agent and title if applicable. (I	NOTE: Registered Agent signature requi	red when reinstating)	DATE
9. This corporation is eligible to satisfy Tax filing requirement and elects to c (See criteria on back)	lo so After MAY 1.	Will FEE IS \$150.00 2001 Fee will be \$550.00 yable to Department of S		ng \$5.00 May Be Added to Fees
<del></del>	ICERS AND DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN 11
NAME Modica, Mari STREET ADDRESS 55 E. Dolph CITY-ST-ZIP Ponte Vedra		TITLE NAME STREET ADDRESS CITY-ST-ZIP	30000473 -12/21/01 ****150.	Change
TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP  TITLE —  NAME  STREET ADDRESS  CITY-ST-ZIP	Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Change ☐ Addition
TITLE - NAME STREET ADDRESS CITY-ST-ZP .	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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320 Osceola Avenue Jacksonville Beach, FL 32250 Phone 904/241-2533 Fax: 904/241-1604 www.triplechecktax.com

December 10, 2001

Division of Corporations Annual Reports Filing Post Office Box 6327 Tallahassee, Florida 32314

Re:

Profit Corporation Annual Report

Document P95000009276 Mario's at the Beach, Inc.

Dear Sir or Madam,

Please see the attached form UBR for year 2001. We are requesting a waiver of the late fee and ask that you accept the enclosed form with the payment of \$150.00 for 2001.

Mrs. Modica, President of the above corporation, never received her report for the 2001 registration period. They receive some business mail at her and some at the restaurant, but she never received her UBR for 2001. She brought this to our attention after applying for a business loan with her bank. The bank was the one that noticed that they were not current with the state. Based on phone conversations with your department, we were advised to fill out and send in this report and the \$150 in fees and request the abatement of the penalties, since Mrs. Modica never received her report.

Thank you for your help with this matter. Please contact me if you have any questions or problems regarding this matter.

Sincerely.

John P. Corliss, CFP

Enclosure:

Form UBR Check #830