

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000060303

FILED
Apr 11, 2002 8:00 AM
Secretary of State

Entity Name: INNER ACTIVE OPTIONS, INC.

Current Principal Place of Business:

88005 OVERSEAS HWY
10180
CORAL SPRINGS, FL 330656412 US

Current Mailing Address:

88005 OVERSEAS HWY 10180
ISLAMORDA, FL 33036 US

New Principal Place of Business:

88005 OVERSEAS HWY
10180
ISLAMORADA, FL 330363067 US

New Mailing Address:

88005 OVERSEAS HWY
10180
ISLAMORDA, FL 330363067 US

FEI Number: 65-0601229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATKINS, RICHARD A
10340 N.W. 43RD STREET
CORAL SPRINGS, FL 330656412 US

Name and Address of New Registered Agent:

WATKINS, RICHARD A
1039 HILLSBORO MILE
#12
HILLSBORO BEACH, FL 330622155 US

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.

SIGNATURE:

04/11/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARRETT, DAVID A
Address: 88005 OVERSEAS HWY #10180
City-St-Zip: ISLAMORADA, FL 33036 US

Title: VP () Delete
Name: GARRETT, DEBRA L
Address: 88005 OVERSEAS HWY # 10180
City-St-Zip: ISLAMORADA, FL 33036 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A GARRETT

P

04/11/2002

Electronic Signature of Signing Officer or Director

Date