## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

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Applied For

Not Applicable

ILED

02 JUL 11 AM 9: 44

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO N	OT	WRITE	IN THIS	SPACE
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2. Principal Place of Business 3. Mailing Address 100 N. JEAGLESON ST P.O. BOX 6146 Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State
TA / 6hasses

DO NOT WRITE IN THIS SPACE

Monticello,

SIGNATURE

11.

DOCUMENT # P45000 85327

would Exploration and Trading Co

USA

32314

Country UJA 59-3355**3**45

4. FEI Number

5. Certificate of Status Desired

\$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent				
Name Bassett, Thomas Jour	r			
Street Address (P.O. Box Number is Not Acceptable	e)			
City Monticello	Zip Code			

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.

Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00 Amended UBR is \$61.25

(NOTE: Registered Agent signature required when reinstating)

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS offken / DIALLYON TITE TITLE Bassett, Thomas Jack NAME NAME STREET ADDRESS 100 N. Tefferson ST STREET ADDRESS CITY-ST-ZIP m. wti all . , F/ 32344 CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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13. Thereby 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

IG OFFICER OR DIRECTOR

6-20-02

Date

Daytime Phone #

CR2E034B (12/01)

6-28-02 Nell 1.0 Box 6146 Tollohisser, Fl 32314

P.O. B.x 1500 Tallahassu, Fl 32302-1500

Gentlemen:

I have now filed my uniform Business Report for the world Exploration and trading 60. I did not received my report and came by to complete this in Reason.

Please accept this report and films fee of \$150. since I did not receive The report.

Thonks.

Thomas Jack Boutt