FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000039469 1. Entity Name Option Center, Inc.						F	H.ED	
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						SECRET	ARY OF STATE ASSEE, FLORIN	;
						i ALLAH/	122EE LI 1100	:
AN AND	DO NOT WRITE	IN THIS SF	ACE	İ				
2. Principal Place of Business 211 4th Avenue North		3. Mailing Address 211 4th Avenue North			5/16/02 90056	047 150	0.00	
Suite, Apt. #, etc.		Suite, Apt. #. etc.			DO NOT WRITE IN THIS SPACE			
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City & State St. Petersburg, FL		City & State St. Petersburg, FL			El Number 59-3425819		Applied For Not Applicable	┨
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			Cityt.	Peters	ourg	FL	^z i33761	1
8. The above	e named entity submits this statement for i	the purpose of changing its re				rida.		ł
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SIGNATURE	Signature, typed or printed name of registered agent and	1 tide 4 prodicable. (NOTE: 6	Registered Agent signal	ure rectured when re-	r≪atrini	DATE		ľ
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Too Sling constraint and plants to do an			Fee is \$550,000; UBR is \$61.25		10. Election Campaign Fin.		\$5.00 May Be	
(See crite	eria en back)	Make Check Payable			Trust Fund Contribution	i. Lj	Added to Fees	
11.	OFFICERS AND D	RECTORS					Section Section	_
TIFLE NAME	President		MANE AND					20
STREET ADDRESS	Gisela Garcia-Leyva		STREET ADDRESS					8
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NAME:			NAME					
STREET ADDRESS STY-ST-ZIP			STREET ADDRESS				Į.	
		•	CTTY-ST-ZIP				Į.	
I3. I hereby o	errify that the information supplied with the	s filing does not quality for the	e exemption state	ed in Section 11	9.07(3)(i), Florida Statutes, I (unther 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 path; 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/0 Z

Dayuma Phone s

STRAWN, MARSHALL, CUNNINGHAM, CONDON & SWEAT, P.A.

Cortified Public Accountants

2092

Max M. Strawn, CPA 1927-1994

John Charles Marshall, CPA Monica L. Cunningham, CPA Kathleen M. Condon, CPA Gary R. Sweat, CPA

August 27, 2002

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

RE: Option Center, Inc.

Dear Sir or Madam:

We are resubmitting the Uniform Business Report for our client as instructed by your office today via telephone. The original report, which was rejected for lack of signature, was never received back by our client.

We are respectfully requesting that all late fees and penalties be waived.

Very truly yours,

Monea L.C.

Monica L. Cunningham, C.P.A.

MLC/kll

Enclosure

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