FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # \$96 0000 74125

SIGNATURE:

FILED Jun 20, 2002 8:00 am Secretary of State

06-20-2002 90058 024 ***150.00

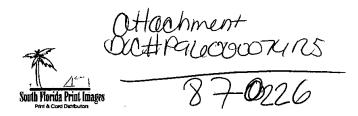
The Boca Group Limited, Inc 010226 DO NOT WRITE IN THIS SPACE Mailing Address 418/ Nw 1st Ave 2. Principal Place of Business 4181 NW 1st Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE #3 Boca Puton City & State Applied For 65-069.1448 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent Cheevers DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) #405 IN THIS SPACE Zip Code 3-3-43/ Boca Maton 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 Signature, typed or printed name of registered agent and trile if applicable. (NOTE: Registered Agent signature required when reinstating) 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 Amended UBR is \$61.25 \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. Treasurer TITLE TITLE Crais Cheevers would #405 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Boca Maton FL TITLE NAME NAME "" STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE 3 TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY+ST-7IP NAME TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ITILE 5 A NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP (1) TITLE TITLE & NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 afforder like/empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

Cheevers

5613913983



The Boca Group Limited, Inc. 4181 NW 1st Avenue, #3 Boca Raton, FL 33431

To Whom It May Concern,

Enclosed please find my 2002 Uniform Business report.

I did not receive my report in the mail and therefore I am filing late.

I have enclosed the filing fee of \$150.

I spoke with a representative who said I should send in my report with this letter.

Thanks for your understanding

Sincerely,

Craig Cheevers