PLEASE REAL	<u>) ALL INSTRI</u>	<u>JCTIONS I</u>	BEFORE C	OMPLET	ING THIS F.C	P.M.		
PLEASE READ ALL INSTRUCTION FLOATION FLOATION Sandra B. M Secretary of DIVISION OF CORE			T OF STATE ham ate	AND FILED 97 DEC - 1 AM IO: 0 I				
DOCUMENT # P96000081535 1. Corporation Name				SECRETARY OF STATE FALL AHASSEE, FLORIDA				
PARRIMOUNTS USA, INC.				f 		- ******	nore	
Principal Place of Business POST OFFICE BOX 1503 CAPE CORAL FL 33910	Mailing Address POST OFFICE BO	DE BOX 1503						
If above addresses are incorrect in any way, line 2. New Principal Office Address, If Applicable	3. Now Mailing O	nation and enter co			orated or Qualified ness in Florida	09/20/19	96	
Sulte, Apr. #, etc.	Suite, Apt. #, etc.				5. FEI Number Applied For			
City & State Zip Country	City & State			6.	569888	S8.75 Addit	Not Applicable	
, Names and Street Addresses of Each Officer and/or Director (Fforida not				CERTIFICATE OF STATUS DESIRED [] for a Certificate of Status				
Name of Officers and/or Directors Rd Int mby Clanifornan PLES RODNEY E. PARRISH		Street Address of Each Officer and/or Director (Do NOT Use Post Office Box 1)		l lumbers)	CAPE Con	City/State/Zip	33904	
			\$10.5 May 2	8	000023 *****165	6446 701082 5.00 ***	87 -027 *165.00	
2. Name and Address of Curren	A Projectored Agent			O. Nama and	I	ph 121	4	
8. Name and Address of Currer LOCKER, JOSEPH R JR 350 5TH AVENUE SOUTH SUITE 200 NAPLES FL 34102	9. Name and Address of New Registered Agent Name Rodress (P.O. Box Number is Not Acceptable) 13 2 2							
10. I, being appointed the registered agent of the a Signature of Registered Agent	bove named corporation	لب	and accept the ob	oligations of Sect	Date _ N	-24 1	1997	
11. This corporation owes or 1 Intangible Personal Prope			r Yes 🏻	No 🗌		other side for info on Intangible tax		
I certify that I am an officer or director or the recthis reinstatement application, the reason for discoved by the corporation have been paid and the on this application is true and accurate, and my	ceiver or trustee empow solution has been elim e names of individuals	vered to execute the Inated, the corpora listed on this form	ate name satisfies do not qualify for	the requirements an exemption un	of section 607.0401 or	r 617.0401, F.S.,	, that all fees	
SIGNATURE: SIGNATURE AND TYPE OUR I	PRINTED NAME OF SIGNI	~ Pu	Ment	Nov	24 1997	T49 Vaylime Pic	41) -901)	

ParriMounts USA

Designers, producers and distributors of DSS Mounting Devices

Rodney G. Parrish President and CEO

November 24, 1997

Division of Corporations Annual Report/Reinstatement Section P.O.Box 6327 Tallahassee FL 32314-6327

Ladies and Gentlemen,

I created and unintentally non-profit corporation in November 1996 and have run into an elaborate number of problems since.

I received my first Annual report filing notice just recently, and then discovered that the filing fee had gone from \$165 to \$750. I can afford \$165 from my own funds which deposit regularly from my Military retirement paty, but there is no way I can afford \$750.

The problems are many: 1. I am used to the word "Annual Report" to describe a year which would be ended either on the anniversary of formation, or the end of a calandar year, with a period of time allowed for preparation and submission.

- 2. My Current Registered Agent, Mr Joseph R. Locker would have some responsibility of notification to requirements after having paid him, and find that he is not longer a member of the Bar. (Incl 1)
- 3. I received a bill for \$165 for a Corporation called SAMMB from a company called CSC, which seemed to be a scam, but I am now my own current registered agent (Incls 2, 3, 4 and 5)
- I have been held up going into effective business by patent problems which are now in Court and will be settled soon. Please accept my appeal for reinstatement for my corporation, and this check for \$165 so I can get back on track. Thank you.

Sincerely,

RODNEY G. PARRISH

P. O. Box 1503, Cape Coral, FL, 33910
Tel (800) 436 6923 or (941) 549 9011 Fax (800) 436 6944 or (941) 549 9369