7/21/2003-90123-020-\$150.00-\$150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

						_		I I have been			-
DOCUMENT # P9600096880 1. Entity Name EARNING CAPACITY ASSESSMENTS, INC.							03 OCT 10 AM 10: 36 SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business Mailing Address PO BOX 893 PO BOX 893 VALRICO FL 33595-0893 VALRICO FL 33595-0890							A CREATE NATIONAL LIGHT AND A STATE OF THE S			Ant Afil (ha)	
2. Principal Place of Business 3. Mailing Address								•			
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				CALCAGEOR HERE	MAKING CH	NGES	03		
City & Star	18		ity & State		4. FEI Number 65-0721158				plied For t Applicable		
Zip	Coun	itry Zi	p	Coun	try	5. (Certificate of Status Desired		75 Add Required		
	dress of Current Registe		Name -	7. N	Name and Address of New Re	gistered Agen	<u>t</u>		4		
BROD, SHERMAN M					Street Address (P.O. Box Number is Not Acceptable)						
324 NO DALE MABRY HIGHWAY STE 300					Sireet Address (P.O. B	ox Number is Not Acceptable)				_
TAMPA FL 33609					<u> </u>					···]
					City FL Zip Code						
5. The above the obliga	e named entity submit tions of registered ag-	is this statement for the purent.	rpose of changing its r	egistere	ed office or register	ed ag	ent, or both, in the State of Flor	ida. I am famili	ar with, a	and accept	
SIGNATURE	Signature, typed or printed r	name of registered agent and title if a	oplicable. (NOTE:	Registere	d Agent signature required	when re	instating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					·,		Election Campaign Fina Trust Fund Contribution.			D May Be to Fees	
10.	100	OFFICERS AND DIRECT	ORS	11.		AD	L DITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS	IN 11	1
TITLE : NAME' STREET ABORESS CITY-ST-ZIP	P COLLARD, STEVE 2719 BUCKHAM VALRICO FL 3359	oaks dr	□ Delete			•			Change	Addillon	CR2E034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2719 B	uckhorn (Delete OAKS Da.						Change	Addition	CR2
TITLE		۰. سر ۱	☐ Delete	mle	24			(hange	Addition :	
STREET ADDRESS CITY-ST-ZIP	s			STRE	ET ADDRESS ST-ZIP						_
TITLE NAME STREET ADDRESS CITY-ST-2IP						1			hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					□ c	hange	☐ Addition	
TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STREE					hange	Addition	

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I turther 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 cath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

8134179168

October 7, 2003

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

RE:

Administration Dissolution Notice Earning Capacity Assessments, Inc. FEI# 65-0721158

Dear Sir or Madam:

This letter is in response to the recent dissolution notice.

10 weeks after incorporating on November 22, 1996, my wife was severely injured. The business I'd dreamed of taking to success turned into a nightmare as suddenly I had a severely disabled wife and three young daughters to care for. I still have dreams of making my business successful, but my obligations as a spouse and father have come first.

Besides cooking and cleaning and homework duties, on average, I have had to drive to a doctor's appointment once per week. Overnight away trips, once routine, cause increased turmoil at home, and I have to limit them. Over the years, it became obvious that it was too difficult to endure the stress involved with trying to manage a business and coordinate a spouse's recovery with raising children. I couldn't do it well; there just weren't enough hours in the day.

The coordination of diminished cash flow has been extremely difficult to manage. Three times this year, power has been cut to our home. The economy has caused my customers to experience cash flow problems of their own, and this has affected me, my family and the business.

My eldest daughter, a junior in high school, came home last week with a new varsity letter, for her academic achievements. My efforts are not without reward...

Please give us a break. We're really trying, and I am actively promoting my business, hoping to get better cash flow without too much overwhelm. If you cannot waive the late filing fees, could you accept periodic payments?

Thank you for your kind consideration.

Sincerely,

Steven M. Collard