2000 UNIFORM BUSINESS REPORT (UBR) P96000098987 FILED DOCUMENT # Jul 19, 2000 8:00 am 1. Entity Name **Secretary of State** Correct Consult Inc. 07-19-2000 90015 003 ***150.00 Principal Place of Business Mailing Address 10467 Keysterne 6+ 10467 Keystone St. Spring Hill FL34608 Spring Hill, FL 34608 B0103398 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 593413555 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent <u>-taanu-</u> Joseph Janezic Street Address (P.O. Box Number is Not Acceptable) 41815 & Busch Blud #113 Tampa, FL 33617 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. FILE NOW!!! FEE IS \$150.00 9.—This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 маў ве After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. vice President ☐ Change ☐ Delete TITLE Toold Fogan 10467 Keyston 5+ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TIT! F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

P96000098987 B0103348

Correct Consult Inc. 10467 Keystone Street Spring Hill, Fl 34608 352-666-5323

Division Of Corporations PO BOX 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam,

I contacted the division of corporations after learning from the registered agent of my corporation Joseph Janezic, that he had not submitted the attached Uniform Business Report. He advised me that he had not received it from your offices, when I inquired about not receiving a bill from him for this. Upon learning it had not been received I contacted your office and was advised to submit a letter with this form regarding this issue. I am changing the registered agent to myself so that I may insure no problems with future payment. Please ensure all future correspondence is sent to me at the address listed above.

Thank You,

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