2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9700001974 1. Entity Name

KNIGHTWARE CORP.

Principal Place of Business

7591 BLACK OLIVE WAY TAMARAC FL 33321

Mailing Address

7591 BLACK OLIVE WAY TAMARAC FL 33321

. Principal Place of Business		3. Mailing Address				<i>)</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FE	1 " " " " " " " " 0.3=0 / 3003 /			olied For Applicable	
Zip	. Country Zip Cou			5 . Ce	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required				
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
STEWART, BRIAN S 7591 BLACK OLIVE WAY				Name Street Address (P.O. Box Number is Not Acceptable)					
	ARAC FL 33321		<u> </u>			\$			
•			City			FL	Zip Code		
. The above	named entity submits this statement fo	r the purpose of changing its	s registered offic	e or registered ager	nt, or both, in the State of F	florida.			
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent	ignature required when rein	stating)	CIATE			
Tax filing n	oration is eligible to satisfy its Intangible equirement and elects to do so. in an on back)	FILE NOW After MAY 1, 20 Make Check Paya)01 Fee will b	e \$550.00	10. Election Campaign F Trust Fund Contributi			May Be to Fees	
1.	OFFICERS AND	DIRECTORS	12.	ADD	ITIONS/CHANGES TO OF	FICERS AND D	IRECTORS	IN 11	
TITLE HAME STREET ADDRESS CITY-ST-ZIP	STEWART, BRIAN S 3995 N.W. 122ND TERR SUNRISE FL 33323	☐ Delete	TITLE NAME STREET ADOR CITY-ST-ZIP	7591 BL	RT, BRIAN S ACK OLIVE WAY AC FL 33321	-	Change	Addition	
TITLE LAME STREET ADDRESS CITY-ST-ZIP	SHELTON, JAMES H 5725 SW 118 AVE COOPER CITY FL 3333	☐ Delete	TITLE NAME - STREET ADDR	ESS		Ţ	Change	Addition	
ITLE MANE STREET ADDRESS STY-ST-ZIP	-	☐ Delete	- TITLE NAME STREET ADDR	ESS	-	[Change -	☐ Addition -	
ITLE		☐ Delæte	TITLE			(Change	Addition	

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 attories, with all other like empowered.

STREET ADDRESS

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TITLE

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Delete

SIGNATURE:

STREET ADDRESS

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STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE AND TYPED OR DIRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 5,2001

(954)434-1919

Change

■ Addition

Addition

Daysimo Phone #

FILED

Jun 19, 2001 8:00 am Secretary of State

06-19-2001 90007 046 ***150.00

CR2E034 (11/0

AHOCMENT DH 4970001970 7591 Black Olive Way AOU 73792 Tamarac, FL 33321

June 5, 2001

Florida Department of State Division of Corporations Attn: Annual Reports P.O. Box 6327 Tallahassee, FL. 32314

To Whom It May Concern:

Subject: KNIGHTWARE CORP. 2001 Uniform Business Report

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Enclosed is our 2001 Uniform Business Report (document number P97000001974) along with a check for the filing fee of \$150.00. We apologize for sending it so late.

However, due to a change in our address, we never received the 2001 Uniform Business Report in the mail. We sent a change of address letter to the Florida Department of State on January 30, 2001. We did not realize that since the change of address was done in January that we would not receive the report. Once we realized this, we downloaded the form and filled it out immediately.

Thank you for your cooperation and understanding in this matter.

Sincerely.

Brian S. Stewart

KNIGHTWARE Corporation