2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P97000019506 Jul 14, 2000 8:00 am Secretary of State ) IACOL, INC. 07-14-2000 90001 029 \*\*\*150.00 Mailing Address 1896 Water Ridge Drive 00068171 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) l Gables, FL 33134 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution Added to Fees ... \_(See criteria on back)\_ Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. ☐ Addition Change TITLE □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS 1896 Water Ridge Drwe CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TIT! E ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-7IP ☐ Charge ☐ Addition ☐ Delete 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 Block 12 if changed, or on an a h an address, with all other like empowered. S!GNATURE

TYPED O

PRINTED NAME OF SIG

ICER OR DIRECTOR

Attachment Dit panwons

DIACOL, INC. 1896 Water Ridge Drive Weston, Florida 33326 (954) 384-0161

June 24, 2000

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: DIACOL, INC.

FEI No. 65-0731746

2000 Uniform Business Report

## Gentlemen:

I respectfully request your consideration to waive the late filing fee for this corporation. DiaCol, Inc. is a one-man, home based operation in Weston, Florida. My job is located in New Jersey, so I travel extensively and have been away from home most of the year.

The timely return of the UBR form was an oversight on my part because I accidentally misplaced the form. Upon realization of this error, I immediately contacted your office.

I sincerely apologize for the delay and thank you for your assistance.

Enclosed is the 2000 Uniform Business Report for DiaCol, Inc. along with the \$150.00 filing fee.

Respectfully Submitted,

Colin D. Haughton, Director

Enclosure