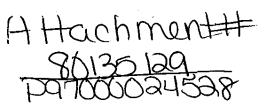
Jul 31, 2003 8:00 am

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Secretary of State P97000024528 DOCUMENT # 07-31-2003 90074 001 ***150.00 1. Entity Name PRACTICAL GROWTH, INC. Mailing Address Principal Place of Business - 329 PLAZA AD #306 | DZ NE ZNO -320-FENZA RD 1986 102 NE **BOCA RATON FL 33432 BOCA RATON FL 33432** US 2. Principal Place of Business 2 M 3. Mailing Address samo Suite, Apt. #, ètc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For 4. FEI Number 65-0753123 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required ----- 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name -BRIER, STEVEN 102 NE 2NVS) # 315 Street Address (P.O. Box Number is Not Acceptable) 820 PLAZA-RD-#806 **BOCA RATON FL 33432** City Zip Code 8. The above named entity spirits this statement or the purpose of changing its registered office or registered agent, or both, in the State of Floriday I am familiar with, and accept the obligations of registe SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 \$5.00 May Be 9. Election Campaign Financing After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ■ Addition BRIER, STEVEN NAME NAME 320 PLAZA AD #306 102 NE 2 ND 8) . #319 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE ZIEGLER, PAUL NAME NAME 4932 A EQUEESTRIAN CR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH FL 33436 CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Addition ☐ Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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 trusted enhowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in

changed, or on an attachment with an a





102 NE 2nd St. #319 Boca Raton, Fl. 33432 954 571 7619

Fax: 208-567-8003 oomph@bellsouth.net

Dear Florida Division of Corporations,

I had never received this form due to CHANGE OF ADDRESS.

I am enclosing the fee due which is \$150.00 which would have been paid timely had I received timely notice.