2000 UNIFORM BUSINESS REPORT (UBR)

| 1. Entity Name | MENT # P97000 ITERPRISES, INC. |)02473 | 36 | | | Se | FIL or 21, 20 ecretary | y of St | ate |
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| Principal Place | e of Business | Mailing | Address | | | , and the second se | | | |
| 2469 ENTERPRI | | 2469 ENT | ERPRISE ROAD | | | | | | |
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| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mallin | 3. Mailing Address Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | |
| | | Suite, | | | | | | | |
| City & State | e | City & | City & State | | | NG-343541/ | | | Applied For Not Applicable |
| Zip | Country | Zip | | Country | 5. (| Certificate of S | Status Desired | \$8.75 Fee Requ | Additional |
| | 6. Name and Address of Curre | int Registered | Agent | Nama | 7. N | lame and Ad | dress of New Regi | stered Agent | |
| DDIO | MOUACL E E00 | Ì | Name Street Add | | | | | | |
| | 6, MICHAEL E ESQ 9 ENTERPRISE RD | + | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| STE | В | } | | | | | | | |
| CLEA | ARWATER FL 33763 | ļ | | City | | | | FL Zip C | ode |
| D. The element | named entity submits this statemen | t for the nume | o of changing its | | enistered and | ent ar both i | n the State of Florida | | |
| ine anove | | u iru me biirbus | | redistered office of re | | | n the State of Honds | | |
| a. the above | riance entry sections this sectioned | ις τον επα φυνφοί | e or changing its | registered office of re | edistered ada | oni, or both, | it the State of Florida | | |
| SIGNATURE . | Signature, typed or printed name of registered as | | [; , | registered office of re | | | | DATE | |
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/2000

Daytime Phone #