

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED *pg 142*  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

|   |         |   |         |
|---|---------|---|---------|
| <b>DOCUMENT # P97000027563</b>  |         |   |         |
| 1. Entity Name<br><b>HEALTH AND LIFE PARTNERS, INC.</b>   |         |   |         |
| Principal Place of Business<br><b>9906 S.W. VENTURA DRIVE<br/>PALM CITY FL 34990<br/>US</b>   |         | Mailing Address<br><b>PO BOX 6<br/>PALM CITY FL 34991<br/>US</b>  |         |
| 2. Principal Place of Business  |         | 3. Mailing Address  |         |
| Suite, Apt. #, etc.   |         | Suite, Apt. #, etc.   |         |
| City & State  |         | City & State  |         |
| Zip   | Country | Zip   | Country |
| 4. FEI Number <b>65-0741312</b>   |         | Applied For<br><input type="checkbox"/> Not Applicable  |         |
| 5. Certificate of Status Desired <input type="checkbox"/>   |         | \$8.75 Additional Fee Required  |         |
| 6. Name and Address of Current Registered Agent<br><b>DEMELLO, GEORGE JR.<br/>9906 S.W. VENTURA DRIVE<br/>PALM CITY FL 34990</b>  |         | 7. Name and Address of New Registered Agent<br>Name <i>Charles Clark</i><br>Street Address (P.O. Box Number is Not Acceptable) <i>901 SW Martin Luther Blvd</i><br>City <i>Palm City</i> FL Zip Code <i>34990</i> |         |
| 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 <i>[Signature]</i> (NOTE: Registered Agent signature required when reinstating) DATE  |         |   |         |
| 9. This corporation is eligible to satisfy its intangible<br>Tax filing requirement and elects to do so.<br>(See criteria on back) <input type="checkbox"/>                     |         | <b>FILE NOW!!! FEE IS \$550.00</b><br><b>After September 12, 2001 Fee will be \$750.00</b><br><b>Make Check Payable to Department of State</b>  |         |
| 10. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/>  |         | \$5.00 May Be Added to Fees   |         |
| 11. OFFICERS AND DIRECTORS  |         | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |         |
| TITLE <b>DP</b><br>NAME <b>DEMELLO, GEORGE JR.</b><br>STREET ADDRESS <b>9906 S.W. VENTURA DRIVE</b><br>CITY-ST-ZIP <b>PALM CITY FL 34990</b> <input type="checkbox"/> Delete    |         | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>900004610119-3</b><br><b>-09/25/01--01043--015</b><br><b>****150.00 ****150.00</b>  |         |
| TITLE <b>ST</b><br>NAME <b>SPITZ, JOSEPH G</b><br>STREET ADDRESS <b>190 HONEYSUCKLE DRIVE</b><br>CITY-ST-ZIP <b>JUPITER FL 33458</b> <input checked="" type="checkbox"/> Delete |         | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP <input type="checkbox"/> Delete  |         | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP <input type="checkbox"/> Delete  |         | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP <input type="checkbox"/> Delete  |         | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP <input type="checkbox"/> Delete  |         | <input type="checkbox"/> Change <input type="checkbox"/> 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 address with all other like empowered.

SIGNATURE: *[Signature]* REQUIRED

CR2E034 (5/01)

pg 2 of 2

September 12, 2001

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Health & Life Partners, Inc. - #P97000027563  
George DeMello & Associates, Inc. - #P96000054015

Dear Sir or Madam:

As stated in our previous letter dated August 11<sup>th</sup>, 2001. We had not been able to complete our UBR due to the fact that they had been received and held by Mr. Spitz. He received them the never were received by our office. We did not receive the original forms mailed to us in January of this year we did not become aware of the forms until July of this year. We had no intention on not completing these forms as you can see from our track record we have never failed to filed these reports timely. We simply did not receive or have access to the forms to complete them. We would again request that in light of this fact you accept our UBR and process the forms without penalty. I thank you for your time and attention in this matter.

Sincerely,

George DeMello Jr.

RECEIVED  
SEP 14 2001

August 11, 2001

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: Health & Life Partners, Inc. - #P97000027563  
George DeMello & Associates, Inc. - #P96000054015

To Whom It May Concern:

Enclosed you will find copies of my Uniform Business Report which was due May 1<sup>st</sup> of this year. Unfortunately, earlier this year we were forced to fire one of our employees. He was also one of our corporate officers and our in-house bookkeeper. Mr. Spitz left us on bad terms in the first week of April this year. He had with him our forms and the two checks we had cut back on April 1<sup>st</sup>. We were unaware that these were not mailed until he returned them to us under pressure from our attorney back in July of this year. If you look at our track record we have never filed late nor will we ever do so again. I would request that due to the nature of the actions by Mr. Spitz, that we be granted some leniency on our corporations. We had no intention of these fees being left unpaid. We would request that you accept our reports and re-instate us to good standing and accept our checks as full payment for our annual fee. If you have any questions please contact our accountant, Mr. Chuck Clark of Clark & Associates at 561-283-7364. Thank you for your time and attention in this matter.

Sincerely,

George DeMello Jr.

cc Chuck Clark