

2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 30, 2002 8:00 am Secretary of State

01-30-2002 90164 011 \*\*\*150.00

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DOCUMENT # P97000053802

1. Entity Name MAINLAND ENTERPRISES, INC.

Principal Place of Business 5880 SHIRLEY ST. NAPLES FL 34109 Mailing Address 5880 SHIRLEY ST. NAPLES FL 34109

2. Principal Place of Business 510 Echo Circle Suite, Apt. #, etc. 3. Mailing Address Suite, Apt. #, etc.

City & State Marco Island FL Mailing Address City & State Zip 34145 Country

4. FEI Number 65-0766487 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent FLEMING, MATTHEW 5880 SHIRLEY ST. NAPLES FL 34109

7. Name and Address of New Registered Agent Name Matthew Fleming Street Address 510 Echo Circle City Marco Island FL Zip Code 34145

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 Matthew Fleming DATE 1/14/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Table with 2 columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Row 1: FLEMING, MATTHEW (Delete checked), PST Matthew Fleming (Change checked), 5880 SHIRLEY ST., 510 Echo Circle, NAPLES FL 34109, Marco Island FL 34145.

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE 1/14/01 DAYTIME PHONE # 941-642-0111

CR2E034 (9/01)