2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nar	MENT # P97000 D RELIEF, INC.	0056849		Feb 14, 2002 Secretary 0 02-14-2002 90061 02	of State	
Principal Place of Business Mailing Address						
10763 CLYDESDALE DRIVE EAST JACKSONVILLE FL 32257		10763 CLYDESDALE DRIVE EAST JACKSONVILLE FL 32257				
2. Principal Place of Business		3. Mailing Address		I ADDINEDI IKU SEKILIBDIK BUSIK SERIK BERIK BERIK BUSIK BERUT BING BING BING BING BIRID 1811 1005 I		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 59-3469149	Applied For Not Applicable	
Zip	Country	Zip Country			\$8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registered /		
WACHS, ALAN S 50 N. LAURA STREET SUITE 3900 JACKSONVILLE FL 32202			Street Address (P.O. Box Number is Not Acceptable)			
JACKSUNVILLE FL 32202			City	City Zip Code		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! I			FEE IS \$150.00 Fee will be \$550.00 to Department of St	10. Election Campaign Financing	\$5.00 May Be Added to Fees	
11.	OFFICERS AND D	IRECTORS ·	12.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	D MENDEL, BURT 10763 CLYDESDALE DRIVE EAST JACKSONVILLE FL 32257	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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indicated of the cor	on this report or supplemental report is to	ue and accurate and that my : ered to execute this report as	signature shall have the	ection 119.07(3)(i), Florida Statutes. I further cert same legal effect as if made under oath; that I a 7, Florida Statutes; and that my name appears in	m an officer or director	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-28-2007

Date

(904)751-6202