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07-12-2001 90114 049 ***150.00
07-31-2001 90237 025 ***400.00
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[REDACTED]

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000073249				Secretary of State			
1: Entity Name TRIBUTE INTERNATIONAL CORP.				07-12-2001 90114 049 ***150.00 07-31-2001 90237 025 ***400.00			
Principal Place of Business 5134 W. IDLEWILD AVE TAMPA FL 33634				Mailing Address 5134 W. IDLEWILD AVE TAMPA FL 33634			
2: Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3: Mailing Address Suite, Apt. #, etc. City & State Zip Country		4: FEI Number 65-0790271		Applied For Not Applicable	
5: Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent MOORE, RICHARD 5134 W. IDLEWILD AVE TAMPA FL 33634				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>				FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		10. Election Campaign Financing 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 NAME STREET ADDRESS CITY-ST-ZIP Delete <input type="checkbox"/>				TITLE NAME STREET ADDRESS CITY-ST-ZIP Change <input type="checkbox"/> Addition <input type="checkbox"/>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete <input type="checkbox"/>				TITLE NAME STREET ADDRESS CITY-ST-ZIP Change <input type="checkbox"/> Addition <input type="checkbox"/>			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete <input type="checkbox"/>				TITLE NAME STREET ADDRESS CITY-ST-ZIP Change <input type="checkbox"/> Addition <input type="checkbox"/>			
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 an other like empowered.							
SIGNATURE: Richard Moore				Date 9-4-01 Daytime Phone # 813-806-3861			

Attachments A0076902

Tribute International Corp
5134 West Idlewild Ave
Tampa, FL 33634
813-806-3861

P97000073249
774076

July 9, 2001

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

Re: **Tribute International Corp**
Document # P97000073249
FEI # 65-0790271

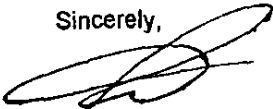
To Whom It May Concern:

Tribute International Corp is a small business. Recently, our bookkeeper was let go because of to many mistakes and errors. While working this past weekend, I was going through his paperwork and found the enclosed 2001 Uniform Business form was never mailed.

Given we are a small business and we had this personnel problem, I am requesting a one time waive of the penalty for filing late as being small it would prevent us from being able to hire another bookkeeper for another two months.

Thank you in advance for your consideration into this matter.

Sincerely,



Richard Moore
President