

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 06, 2002 8:00 am
Secretary of State

06-06-2002 90085 006 ***150.00

DOCUMENT # **P98000000242**
1. Entity Name **ECHO EXPO, INC.** ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 726 CENTRAL FL PKWY Suite, Apt. #, etc. #4		3. Mailing Address 2316 NE minnehaha Suite, Apt. #, etc. Vancouver WA	
City & State ORLANDO FL		City & State Vancouver WA	
Zip 32824	Country USA	Zip 98665	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3486105	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **CHRIS HEALY**
Street Address (P.O. Box Number is Not Acceptable)
2975 N. NARCOOSSEE RD.
City **ORLANDO** FL Zip Code **32771**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when consisting) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

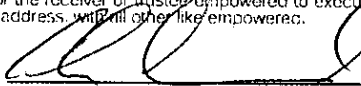
11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT TINA CANNARD 2316 NE minnehaha VANCOUVER WA 98665
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V.P. CHRIS CANNARD 2316 NE MINNEHAHA VANCOUVER WA 98665
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC. CHRIS HEALY 726 CENTRAL FL PKWY #4 ORLANDO FL 32824
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREA. BRIAN STURGIS 726 CENTRAL FL PKWY #4 ORLANDO FL 32824
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **CHRIS CANNARD** 6/3/02 503-234-1552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)