13. I hereby certify that the information supplied with this filling 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 trusted 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 applicase, with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

9/12/00

(305) 254-7388

Daytime Phone #

☐ Change

☐ Addition

attachment # P9800004720 B0106894

September 12, 2000

Florida Department of State Divisions of Corporations 409 East Gaines Street Tallahassee, FL 32399

To Whom It May Concern:

This is to inform you that Alanis Entertainment and Promotions, Inc and ADS Infrastructure Services, Inc did not receive the original Filling documents and just received the 2nd notice. I made a call to your office and was told to make the original payment of \$150.00 explaining the problem, also to mail the form by overnight delivery.

Enclosed you will find the 2000 uniform business reports and a check made payable to Department of State.

If you require additional information, please contact me at (305) 471-0901

Thank you,

Sincerely,

Folake Majek

Treasurer