2003 FOR PROFIT CORPORATION

UN	IFORM BU	SINESS	REPOR	r (,	JBR)		<u>;</u>				8
DOCUMENT # P98000019536 1. Entity Name INTELLIHOMES ASSOCIATES INC.							FILED 03 JUN 30 AM 10: 02 State And to the terms of the				
Principal Place of Business 9615 NW 76 STREET TAMARAC FL 33321		9615	Mailing Address 9815 NW 76 STREET TAMARAC FL 33321				TALLAHASSEE, FLORIDA				
2. Principal Place of Business		3. Mai	3. Mailing Address			_					
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.			_	CHECK HERE IF MAKING CHANGES				
City & State		City	City & State		4. FEI		. FEI Number 65-0818936		<u> </u>	plied For t Applicable	
.Zìp	.Zip Country		Zip		Country		. Certificate of Status Desired		8.75 Add	itional	1
	6. Name and Address	ed Agent		7.	Name and Address of New Re	gistered A	jent]		
				ļ	Name						1
RAWDIN, BRUCE					Street Add	ress (P.O.	Box Number is Not Acceptable)				1
9615 NW 76 STREET											4
TAMARAC FL 33321											}
					City		·	FL	Zip Code)	1
	e named entity submits this s tions of registered agent.	statement for the purp	ose of changing its i	registere	ed office or re	gistered a	agent, or both, in the State of Flori	da. I am fai	miliar with, a	and accept	
SIGNATURE	Signature, typed or printed name of re	egistered agent and title if ann	NOTE (NOTE	Bonisterer	Agent signature r	raquirad wha	D rainetating)	DATE		,	
			MCADIS. (NOTE	. negisterec	YABOU SIGNALIA	edoile0 wile	T remaining/				$\left\{ \right.$
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of		\$550.00	f State						55.00 May Be added to Fees		
10.	OFFI	CERS AND DIRECTO	RS	11.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTORS	S IN 11	_ [
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAWDIN, BRUCE 9615 NW 76 STREET TAMARAC FL 33321	15 NW 76 STREET		NAME STREE	TITLE NAME STREET ADDRESS CITY-ST-ZIP		40002140 07/09/0301011	023 *	□ Change 2-1 *150.0	☐ Addition	CR2E034 (10/02)
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 1

Intellihomes Associates Inc. 9615 NW 76th St. Tamarac, Fl. 33321

To Sean Toner

Re: Review

Dear Mr. Toner,

Please find the enclosed documents regarding my Uniform Business Report. I respectfully ask that you review the reason for my request for a waiver of the late fee. As you can see, my accountant died suddenly on Feb. 22, 2003. His daughter, Jennifer, is the executor of his estate and when I received my business records back was when I learned that my report had not yet been filed. It was my understanding that my accountant had already filed the report in a timely manner, as I had given him the documents much earlier in the year and was assured they would be filed. Gary Edwards was not just my accountant, but also my friend and the last few months have been hard on everyone who knew Gary.

Please accept the enclose \$150 check as payment for my report under the circumstances I have explained. It would be a compassionate and reasonable consideration on your part and I would be very grateful for your understanding of the situation, and reason for the late filing.

Thank you again for your consideration of this matter.

Sincerely,

Bruce Rawdin

President