2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P98000050622 Jul 26, 2000 8:00 am Secretary of State ELIZABETH J. SKEEN, INC. 07-26-2000 90014 026 ***150.00 Mailing Address Principal Place of Business 985 WENDAM COURT 985 WENDAM COURT PORT ORANGE FL 32127 PORT ORANGE FL 32127 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3526114 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SKEEN, ELIZABETH J Street Address (P.O. Box Number is Not Acceptable) 985 WENDAM COURT PORT ORANGE FL 32127 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition TITLE TITLE ☐ Delete SKEEN, ELIZABETH J NAME NAME 985 WENDAM CT STREET ADDRESS STREET ADDRESS PORT ORANGE FL CITY-ST-ZIP CITY-ST-ZIP ■ Addition ☐ Change ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Chance TITLE TITLE ☐ Delete NAME_ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITI F ☐ Delete TIT! F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

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 all other like empowered.

SIGNATURE:

SIGNATURE OF SIGNING OFFICER OR DIRECTOR

7/17/2000

904-760-6609

Daytime Phone #

AHTACHMENT OHPA8UUU50620 DW741604

July 17, 2000

Florida Dept. of State
Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sirs;

I have just received a notice to file the 2000 uniform business report for my corporation. The notice states that it is a second notice, but it is the first notice I have received. I am a novice at business; my corporation is less than two years old, and I always turn over any correspondence of this type to my-accountant. I would have returned this form and paid the filing fee on time if I had received it.

My accountant told me the "on time" fee is \$150.00 and I am enclosing a check in that amount. I apologize for missing the earlier deadline, but am very sure that I did not receive the notice, and hope that I will not be penalized for a lost mail situation.

Thank you for your consideration.

Ilyabeth J. Skeen

Yours truly,

Elizabeth J. Skeen