2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9800053111 MY BABIES, INC. 02 DEC -2 AHIG: 14 Principal Place of Business Mailing Address 4160 NW 1 AVEUNE 4160 NW 1 AVEUNE SECRETARY OF STATE SUITE #17 SUITE #17 TALLAHASSEE, FLORIDA **BOCA RATON FL 33431** BOCA RATON FL 33431 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 65-0845981 Applied For Zip Country Zip Not Applicable Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent Fee Required - 7:-Name and Address of New Registered Agent FERNANDEZ, ARMANDO -880 SPRING CIRCLE Street Address (P.O. Box Number is Not Acceptable) STE #206 DEERFIELD FL 33441 8. The above named entity subgrits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 (See criteria on back) 10. Election Campaign Financing Make Check Payable to Department of State \$5.00 May Be Trust Fund Contribution. 11. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PSTD** ☐ Delete NAME FERNANDEZ, ARMANDO I TITLE (4/02)STREET ADDRESS ☐ Addition 880 SPRING CIRCLE #206 NAME CITY-ST-ZIP **DEERFIELD FL 33441** STREET ADDRESS CR2E034 CITY-ST-ZIP TITLE ☐ Delete NAME ☐ Change ☐ Addition STREET ADDRESS NAME 100008790631 11/04/02--01094--021 \*\*1 CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP \*\*150,00 TITLE: Delete NAME TITLE ☐ Change STREET ADDRESS Addition STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete IAME TITLE ☐ Change TREET ADDRESS NAME ☐ Addition ITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TLE Delete TITLE **MF** ☐ Change ☐ Addition REET ADDRESS NAME TY-ST-ZIP STREET ADDRESS CITY-ST-ZIP LE Delete ME TITLE ☐ Change ☐ Addition REET ADDRESS NAME Y-ST-ZIP STREET ADDRESS 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 truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the corporation of the corporation or the receiver or truetee empowered. CITY-ST-ZIP **GNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/30/03 561-3948200

## MY BABIES, INC

4160 NW 1 Avenue Suite 17 Boca Raton, FL 33431 (561) 394-8200

November 25, 2002

**Dept of State Division of Corporations** PO Box 6327 Tallahassee, FL 32314

RE: 2002 UBR

Document #P98000053111

We have received your notice dated November 8, 2002 (copy attached). We graciously request that the \$600 reinstatement fee be abated. The 2002 UBR was not timely filed because there was a mix-up in thinking that the new report for 2002 was actually a duplication of the 2001 UBR that was filed in November 2001. We believed that the payment for the 2001 UBR crossed in the mail with the 2002 UBR and that all your office needed was some time to process the payment for 2001 and that would clear up the 2002 fees. We now know that to be a mistake and have taken steps to ensure that in the future all returns are timely filed.

Based on the above please abate the \$600 fee and process the return for 2002 as filed.

Thank you.

Sincerely,

Armando Fernandez

President