2000	UNIFORM BUS	INESS REPO	RT (UBR)	
DOCUMENT # PGBOOD 5474				
				FILED
				'
Principal Place of Business Mailing Address		Mailing Address		00 MAY 22 PM 2: 01
10752-126th Avenue N. Łargo, FL 33778-2708		10752-126th Avenue N. Largo, FL 33778-2708		SECRETAIR OF STATE TALLAHASSEE, FLORIDA
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 Applied For 59-3520774 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
	o. Name and Nacious of Salione		Name	•
Rex Golden 556 First Avenue N.			Street Add	ress (P.O. Box Number is Not Acceptable)
St. Petersburg, FL 33701				
·			City	FL Zip Code
8. The above	-	or the purpose of changing its r	egistered office or re	egistered agent, or both, in the State of Florida.
SIGNATURE _	Rex Golden Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature in	required when reinstating) DATE
9: This corporation is eligible to satisfy its Intangible— Tax filing requirement and elects to do so. (See criteria on back) Tax filing requirement and elects to do so.			O Fee will be \$550	100 Trust Fund Contribution. Added to Fees
11.	OFFICERS AND	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT Gary H. Heinicka 10752-126th Avenue N. Largo, FL 33778-2708	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME -STREET ADDRESS- CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 accurrate 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-2-80

727-585-3190

Daytime Phone #

Division Of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

I never received my UBR filing reports, when I realized this, I called to get blank forms and filled them out and mailed back immediately. I should receive two the same address but they were never received even though there were no changes in the mailing address.

Sincerely,

Gary H. Heinicka President – GHH Inc.

Preisident - Campus Collection, Inc.