

2000 UNIFORM BUSINESS REPORT (UBR)

1052

DOCUMENT # P98000058288

09-22-2000 90004 023 ***150.00

1. Entity Name
PROSPERITY NETWORK, INC.

FILED

00 OCT -5 PM 2:04

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
5101 COLLINS AVENUE #10-H
MIAMI FL 33140-2714

Mailing Address
5101 COLLINS AVENUE #10-H
MIAMI FL 33140-2714



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5101 Collins Avenue (#10-H)

3. Mailing Address
5101 Collins Avenue

Suite, Apt. #, etc.
#10-H

City & State
Miami Beach FL

City & State
Miami Beach FL

Zip
33140-2726

Country
USA

4. FEI Number **65-0849229**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BRENT, CHARLES
5101 COLLINS AVE STE #10-H
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRENT, CHARLES 5101 COLLINS AVENUE #10-H MIAMI FL 33140-2714	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRENT, CHARLES 5101 COLLINS AVENUE #10-H Miami Beach FL 33140-2726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 REQUIRED** **9/20/2000** **(305)864-8899**

DATE DAYTIME PHONE #

CFR2034 (5/00)

KE

**SMALL BUSINESS ACCOUNTING SERVICES
OF SOUTH FLORIDA**

401-69TH STREET, #17J
MIAMI BEACH, FL 33141

Tel: 305-861-0260

Fax: 305-867-7911

October 2, 2000

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Prosperity Network, Inc.
FEI# 65-0849229
2000 Uniform Business Report

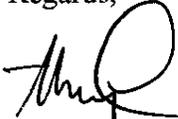
To Whom It May Concern:

I am writing on behalf of my client regarding the \$400 late filing penalty. My client sent the first notice with his check in April of 2000. Unfortunately, the check and form were lost. Both my client and I called and were told to send this letter and pay \$150 with his second notice. We are requesting the removal of \$400 in penalties, as it was not the fault of my client that the form did not reach you timely.

Please remove the penalty as a one-time courtesy to my client. Unfortunately, if you are not willing to do so, he believes that he cannot pay the penalty. My client is still in start up and has only expended money on this business so far.

Please feel free to contact me at the number above if you have further questions. Otherwise, I will advise my client to await your response. Thanking you in advance for your assistance.

Regards,



Stacy Sand, CPA
President