

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90033 016 ***150.00

DOCUMENT # : *P-98000058463* *2002*

1. Entity Name

Survey Heaven Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8862 Bloomfield Blvd.

Suite, Apt. #, etc.

3. Mailing Address

8862 Bloomfield Blvd.

Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Sarasota, FL

4. FEI Number

65-0846908

Applied For

Not Applicable

Zip

34238

Country

U.S.A.

Zip

34238

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

David M. Silverstein - Attorney

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

Kirk Pinkerton

720 South Orange Ave.

City

Sarasota

FL

Zip Code

34236

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

[Signature]
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-02

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☒

(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*President, Secretary
Eric M. Moody
8862 Bloomfield Blvd.
Sarasota, FL 34238*

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-29-02

Daytime Phone #

941-954-1500