## **FILED**

## 2002 UNIFORM BUSINESS REPORT (UR

DOCUMENT # P98000064751							Jul 16, 2002 8:00 am Secretary of State			
1. Entity Nar	me					İ		•		
A DIFFE	RENT PE	RSPECTIVE FOR YO	OU, INC.				07-16-2002 9	0352 003 ***	550.00	
					1	(P)				
	ce of Busines		Mailing Address			<b>-</b>				
15040 BRIDGEWAY, UNIT 606 FT. MYERS FL 33919			15040 BRIDGEWAY, UNIT 606 FT. MYERS FL 33919							
TI. WITCHGI	- C 00010		FT. MIENO FL 33313						****	
2. Principal Place of Business			3. Mailing Address			_		0111	1001 111101 1101 1101	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE	IN THIS SPACE		
City & State			City & State			4.	FEI Number <b>65-0854059</b>	-	Applied For	
Zìp		Country	Zip	Coun	itry	5. 4	Certificate of Status Desired	□ \$8.75 Fee Req	Not Applicable Additional	3
	6. Name	and Address of Current F	Registered Agent	<u> </u>		7. 1	Name and Address of New Reg			$\dashv$
PALMER,	STACEY				Name				· · · ·	
	RIDGEWAY,	UNIT 606	Street Address (			s (P.O. E	Box Number is Not Acceptable)			7
	RS FL 33919								,	
					City			FL Zip C	Code	-
8. The above	named entity	y submits this statement for	the purpose of changing its	s registere	ed office or regis	stered ag	ent, or both, in the State of Florio	a. I am familiar w	ith, and accept	7
_		arod agoni.								
SIGNATURE		or printed name of registered agent an	nd title if applicable. (NO	TE: Registere	d Agent signature requ	iired when re	pinstating)	DATE		
		ble to satisfy its Intangible			19 \$550.00	7_	10 Clastics Compains Circum			
Tax filing requirement and elects to do so.  (See criteria on back)			After September 13, 2002 Fee will be \$750. Make Check Payable to Department of Sta			50.00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			
11.		OFFICERO AND D		w.o (0 D	-	itate	Trade Forte Contribution.	∐ Ad	ded to rees	
****	וח	OFFICERS AND D	DIRECTORS -	12.			DITIONS/CHANGES TO OFFICE			    -
TITLE NAME	D   Palmer, :	STACEY	Delete	<b>12.</b>	:				ORS IN 11	(00)
NAME STREET ADDRESS	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606		12. TITLE	:			RS AND DIRECT	ORS IN 11	700/7/
NAME STREET ADDRESS CITY-ST-ZIP	PALMER, 15040 BRI	STACEY	☐ Delete	12. TITLE NAME STREE CITY-	ET ADDRESS -ST-ZIP			RS AND DIRECT	ORS IN 11 pe	1000 (4)
NAME STREET ADDRESS	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606		12. TITLE NAME STREE	ET ADDRESS -ST-ZIP			RS AND DIRECT	ORS IN 11 pe	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	☐ Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS -ST-ZIP			RS AND DIRECT	ORS IN 11 pe	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	□ Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS -ST-ZIP			RS AND DIRECT	ORS IN 11  De Addition  De Addition	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	☐ Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS -ST-ZIP			RS AND DIRECT	ORS IN 11  Je Addition  De Addition	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	□ Delete	12. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE	ET ADDRESS -ST-ZIP			RS AND DIRECT	ORS IN 11  De Addition  De Addition	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	☐ Delete ☐ Delete ☐ Delete	12. TITLE NAME STREI CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP		DITIONS/CHANGES TO OFFICE	RS AND DIRECTION Change Change Change Change Change Change	ORS IN 11  pe Addition  pe Addition  pe Addition	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	□ Delete	12. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE	ET ADDRESS -ST-ZIP			RS AND DIRECT	ORS IN 11  pe Addition  pe Addition  pe Addition	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	☐ Delete ☐ Delete ☐ Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE NAME STREE	ET ADDRESS -ST-ZIP		DITIONS/CHANGES TO OFFICE	RS AND DIRECTION Change Change Change Change Change Change	ORS IN 11  pe Addition  pe Addition  pe Addition	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	Delete  Delete  Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE NAME STREE	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP		DITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 11  pe	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	☐ Delete ☐ Delete ☐ Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME NAME NAME NAME NAME	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		DITIONS/CHANGES TO OFFICE	RS AND DIRECTION Change Change Change Change Change Change	ORS IN 11  pe	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	Delete  Delete  Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE STREE STREE STREE	ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ĀD	DITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 11  pe	1000 (4)
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PALMER, 15040 BRI	STACEY DGEWAY, UNIT 606	Delete  Delete  Delete	12. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE STREE STREE STREE	ET ADDRESS ST-ZIP	ĀD	DITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 11  pe	1000 (4)

ET BESTER OF RELEASE 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 of rustee empowered to execute this reflort 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.

CITY-ST-ZIP

SIGNATURE: 4

CITY-ST-ZIP