2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000068365 Y & Y ASSOCIATES, INC.

Mailing Address

Principal Place of Business 5012 BRADEN RIVER ROAD BRADENTON-FL-34203

_5812-BRADEN RIVER ROAD BRADENTON-FL-34203

FILED May 15, 2001 8:00 am Secretary of State 05-15-2001 90165 012 ***150.00

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Signature of the state of the s	Principal Place of Business Mailing Address						
State Address State Stat	Suite, Apt 5961	#, etc. + S.A 64 E.	5904 5.	904 S.R 64 E.		DO NOT WRITE IN THIS SPACE	
S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YODER, MARK S812-BRADEN FIVEN FOAD- BRADENTON FIL 34203 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 Symmet. Appel or instend rame of registered sport and tips of applicate. 9. This proportion is eligible to satisfy its Intangible Tax filling requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 11. DPS YODER, MARK YOR ST-2P Delete INLE MAKE SIRRET ADDRESS DIV. ST-2P Change Addition MAKE SIRRET ADDRESS DIV. ST-2P Delete INLE MAKE SIRRET ADDRESS DIV. ST-2P Delete TILE MAKE SIRRE	City & Sta	denton, FL	Bradenton,	adeuton, FL:		Not Applicable	
YODER, MARK \$612-BRADENTON FIL-94293 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, incorporation is eligible to satisfy its intangible Task filing requirement and elocits to do so. (See criteria on back) DPS VODER, MARK YODER, MARK YODER, MARK SISTER ADORESS CITY-ST-2P Delete INLE MAKE SIREST ADORESS CITY-ST-2P CITY-	34208 USA		34208 Registered Agent			Fee Required	
Street Address (P.O. Box Number is Not Acceptable) #### Breezy Pines Blud. City	YODER, MARK 5812-BRADEN RIVER ROAD -			Name			
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, hipsed or protect name of registered agent and tice if applicable. (NOTE: Registered Agent algoriture required men reminaturing) DATE 9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State Defended in the process of Corporation o				Street A	4717 Breezy Pines Blud.		
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Signature, typed or preted name of registered agent and titled applicable. (NOTE: Registered Agent signature required when remistating) 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.	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.						
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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 gither like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #