

2003


# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

1al2

03 JUL -2 PM 4:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # <b>P98000073195</b>	
1. Entity Name <b>186K. Net CO.</b>	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>6401 N. Congress Ave</b>	3. Mailing Address <b>same</b>
Suite, Apt. #, etc. <b>Suite 200</b>	Suite, Apt. #, etc.
City & State <b>Boca Raton, FL</b>	City & State
Zip <b>33487</b>	Country <b>USA</b>

**500021761345**  
**07/24/03--01013--031 \*\*150.00**

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number <b>05-0858092</b>		Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name <b>Koury, Don</b>		
Street Address (P.O. Box Number is Not Acceptable) <b>6401 N. Congress Avenue</b>			
Suite <b>Suite 200</b>			
City <b>Boca Raton</b> FL Zip Code <b>33487</b>			

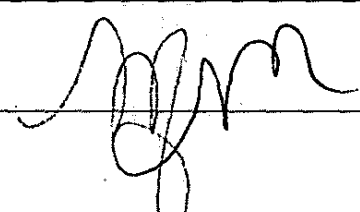
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

January 1 - May 1, Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>Koury, Don</b> <b>6401 N. Congress Avenue</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Suite 200</b> <b>Boca Raton, FL 33487</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE


12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/26/03 561 988 2001**

Date

Daytime Phone #

CR2E034B (12/02)

2nd 2

**186K.Net, Co.**  
6401 N. Congress Avenue  
Suite 200  
Boca Raton, FL 33487

June 26, 2003

Ms. Michelle Milligan  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

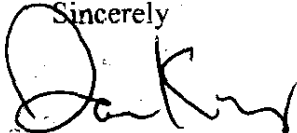
Re: 186K.Net Co  
Document #: P98000073195

Dear Ms. Milligan:

I am writing you to respectfully request that the late fee assessed to my corporation be waived. Upon changing bookkeepers it was brought to my attention that my 2003 UBR has not been filed. I honestly never saw nor remember receiving the report, leaving me to believe my prior bookkeeper did not follow through with her responsibilities. Please accept this copy which I have downloaded from your website as the original obviously cannot be located.

I kindly ask that you consider the situation and file this report with the regular filing fee of \$150.00.

Sincerely



Don Koury  
President

DK/kb

Enclosures (2003 UBR)

