

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

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04 FEB -9 PM 4:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000102989	2004
1. Entity Name Electronic List Company	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3410 N.W 21 Street Suite, Apt. #, etc.		3. Mailing Address 3410 N.W 21 Street Suite, Apt. #, etc.	
City & State Coral Springs, FL		City & State Coral Springs, FL	
Zip 33066	Country US	Zip 33066	Country US

REINSTATEMENT 03-04

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0883716		Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Luis A. Escobar
Street Address (P.O. Box Number is Not Acceptable)
6209 West Commercial Blvd, Suite Seven
City
Fort Lauderdale FL Zip Code
33319

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

Signature, typed or printed name of registered agent and title if applicable. (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	PVPST Norman Patrick English 3410 N.W 21 Street Coral Springs, FL 33066
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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:

Norman Patrick English

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/04

Date

Daytime Phone #

CBS FINANCIAL, CPA, PA

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

COMPREHENSIVE BUSINESS AND INDIVIDUAL FINANCIAL SOLUTIONS

January 29th, 2004

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: Electronic List Company
Form: 2003 and 2004 Uniform Business Report
Document #: P98000102989

Dear Madam/Sir,

We have been retained by the above referenced taxpayer recently.

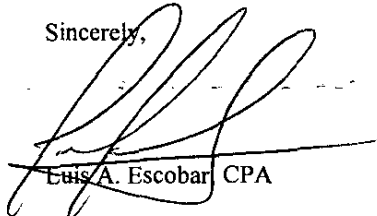
During our initial interview with the taxpayer it was discovered that **they had not received** the Florida's 2003 Uniform Business Report; therefore, they had not filed it. Please note that the taxpayer **has moved** and has a **new mailing address**.

Please find enclosed the a properly completed 2003 and 2004 Uniform Business Reports and a check payable to the Florida Department of State in the amount of \$300.00.

Please abate any late filing fees or other penalties. The taxpayer did not intend to file late.

Please do not hesitate to contact our offices if you have any questions.

Sincerely,



Luis A. Escobar CPA

Encl.: 2003 Uniform Business Reports
Cc.: Sunny Day Properties Management, Inc.

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1688