

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

DOCUMENT # P99000010112 ✓
1. Entry Name
Contractor Source.com

DO NOT WRITE IN THIS SPACE

37924

2. Principal Place of Business
2271 Vistawood Way
Suite, Apt. #, etc.

3. Mailing Address
SAME
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Boca Raton, FL
Zip
33428 Country
USA

City & State
City & State
Zip
Country

4. FEI Number
65-0907996 Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name
BARRY WEISS
Street Address (P.O. Box Number is Not Acceptable)
2271 VISTAWOOD Way
City
Boca Raton FL Zip Code
33428

8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
SIGNATURE [Signature] DATE 6/15/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

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	<u>BARRY WEISS Pres</u> <u>2271 VISTAWOOD Way</u> <u>Boca Raton FL 33428</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Gregory Masone - Sec/Treas</u> <u>526 Fayette Ave</u> <u>Manassas, N.Y. 10543</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Leonard Weiss - Gen Mgr</u> <u>806 The Crescent</u> <u>Manassas, N.Y. 10543</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
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CR2E034B (12/01)

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] Barry Weiss 4/29/02 61-482-5336
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD MEMBER OR DIRECTOR Date Daytime Phone #