FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) rittelu DOCUMENT # FURL BURY OF STATE 1. Entity Name SION OF COMPORATION 02 FEB -7 AM II: 53 DO NOT WRITE IN THIS SPACE 400004917224--6 -02/13/02--01104--012 \*\*\*\*300.80 \*\*\*\*300.80 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE & State 1 4. FEI Number Applied For Miauli Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name DO NOT WRITE Street Address IN THIS SPACE City 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, typed or printed name of registered agent and title if applicable January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE T/T! F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE 4 NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 upon 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 of

SIGNATURE:

CR2E034B (12/01)

## Margin Maker Corp. 117 E. Flagler Street Miami, FL 33131

2-4-02

Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: P99000027190

To Whom It May Concern:

Please be advised that the mailing address that you are showing for my corporation has changed. Because of this, I never received my annual renewal form and my corporation has been administratively dissolved.

Enclosed you will find a blank UBR that I have filled out with my new address. I have also included the filing fees for last year and for this year. Please reinstate my business and update my information.

Thank you,

Chagay Rozen

President