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

SIGNATURE:

FILED DOCUMENT # P 99 0000 32529 02 JUN -7 AM 10: 57 1. Entity Name Danz FORCE, INC SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 2728 5. CHICKASAU TR 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State Orlando FL 32829 3570413 Not Applicable Country Zin Country \$8.75 Additional Certificate of Status Desired 338299 Fee Required 7. Name and Address of Current Registered Agent WATSON MARY LISA DO NOT WRITE trept Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 8. The above riamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) January 1 - May 1⊪Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 10. Election Campaign Financing \$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 DRESIDENT TITLE 900005869359. mary Lisa watson your Andover Coy Blud NAME NAME -06/19/02---01069--019 STREET ADDRESS STREET ADDRESS CR2E034B ****300.00 ****300.00 Orlando FL 32825 CHY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME . STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY ST-ZIP TITLE mie -NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-7IP CITY-ST-ZIP TOLE IN-THIS SPACE NAME : NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST. ZIP TITLE TITLE 🕍 📜 🖓 NAME NAME: 5 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY: ST - ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY- ST. ZIP fy for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information hat my signature shall have the same legal effect as if made under oath; that I am an officer or director report as required by Chapter 607, Florida Statutes: and that my name appears in Block 11 or on an 13. Thereby certify that the information supplied with this filling does not out indicated on this report or supplemental report is true and of the corporation or the receiver of trusted empewered to accurate and that my empewered to execute this report as attachment with an address, with a

NING OFFICER OR DIRECTOR

-A Hachment
DANZ FORCE

PG JOF J MARY LISA WATSON Director

4/19-2001

Dear Sir's

When my tax consultant was doing my taxes she checked on my corporation status and found out that we, DanzForce Incorporated, no longer existed. However, DanzForce is still in existence but-since I have moved twice within the last two years my renewal forms did not get forwarded and I never realized it. I sincerely apologize for my absent mindedness and hope that you can reinstate my corporation. I have enclosed a check for 2001 and 2002 I hope this is ok if not I hope someone would call me at 407-234-6421 and let me know what I need to do.

Sincerely,

Mary Watson