

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000052774**

1. Entity Name

LEVEL BEST INC.**FILED**
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90043 028 ***158.75

Principal Place of Business

Mailing Address

2692 ALLAMOSA PLACE
LAKE MARY FL 327462692 ALLAMOSA PLACE
LAKE MARY FL 32746-2372

2. Principal Place of Business

3. Mailing Address

2692 ALAMOSA PL. 2692 ALAMOSA PL.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

Lake Mary, FL.

Lake Mary, FL.

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DRATYON, VINCENT
2692 ALLAMOSA PLACE
LAKE MARY FL 32746

Name Drayton, Vincent

Street Address (P.O. Box Number is Not Acceptable)
2692 ALAMOSA PLACE

City Lake Mary

FL

Zip Code 32746

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 Vincent Drayton Director

(NOTE: Registered Agent signature required when reappointing)

2/21/00
DATE9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution.\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAYTON, VINCENT	NAME	
STREET ADDRESS	2692 ALLAMOSA PLACE	STREET ADDRESS	2692 Alamosa Place
CITY-ST-ZIP	LAKE MARY FL 32746	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAYTON, LUCIA	NAME	
STREET ADDRESS	2692 ALLAMOSA PLACE	STREET ADDRESS	2692 Alamosa Place
CITY-ST-ZIP	LAKE MARY FL 32746	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBB, FAYTHA	NAME	
STREET ADDRESS	2692 ALLAMOSA PLACE	STREET ADDRESS	2692 Alamosa Place
CITY-ST-ZIP	LAKE MARY FL 32746	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Vincent Drayton 2/21/00 407.302.3197
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)