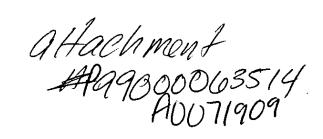
2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900063514 Aug 08, 2000 8:00 am Secretary of State 1. Entity Name RICK BRADON, P.A. 08-08-2000 90092 045 ***150.00 Mailing Address Principal Place of Business 822 WALNUT STREET 822 WALNUT STREET ORLANDO FL 32806 ORLANDO FL 32806 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRADON, RICK Street Address (P.O. Box Number is Not Acceptable) **822 WALNUT STREET** ORLANDO FL 32806 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PRESIDEN 1 Change ☐ Addition Delete TITLE NAME RICK BRADON STREET ADDRESS STREET ADDRESS OPURNOS H 32306 CITY-ST-ZIP CITY-ST-7IP 122 WALNUA. vi ce president Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Change ☐ Addition TITLE ☐ Delete - -TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS

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 respiver or true employered 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 attach

CITY-ST-ZIP



July 31, 2000

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahasee, FL-32302-----

To Whom It May Concern,

Several weeks ago, while out of town at a clinic regarding some health concerns, I received from your office a second notice for the 2000 Uniform Business Report. Having not received a first note for the 2000 Uniform Business Report, I am sending the original fee of \$150. A check for the original filing amount is enclosed with the Report.

Sincerely,

KICK DI adoli

Rick Bradon, P.A. 822 Walnut Street

Orlando, Florida 32906