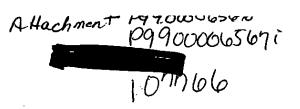
## √ 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000065670 Aug 22, 2000 8:00 am Secretary of State 1. Entity Name AUGUST COOK DESIGN, INC. 08-02-2000 90157 013 \*\*\*150.00 Mailing Address Principal Place of Business 1521 ALTON RD..#363 1521 ALTON RD.#363 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 650914495 Not Applicable Country Country \$8.75 Additional Ζīρ 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7.- Name and Address of New Registered Agent COOK, AUGUST Street Address (P.O. Box Number is Not Acceptable) 1521 ALTON RD.,#363 MIAMI BEACH FL 33139 Zip Code 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 true if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 . 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5,00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE ☐ Delete TITLE PREYDENT NAME NAME AUGUST RD #363 STREET ADDRESS STREET ADDRESS ALTON 1521 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete 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 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 exercise 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 a address, with all other like amounted.

SIGNATURE





July 19, 2000

Department of State New Filings Department

FEI number: 650914495

To whom it may concern,

I am writing this letter regarding my 2000 Uniform Business Report and the renewal form process. I have been incorporated for about a year and am concerned about the correct procedure in which to renew my incorporation status.

I have just recently received a renewal form, and am enclosing it, along with a check for \$150.00 to renew my incorporation status. I did not receive any notification(s) prior this form. I have filed an extension regarding my 1999 taxes and was informed that I need to renew my incorporation paperwork. I was not aware of any deadlines regarding renewal fees.

Please call me with any questions that you may have. Thank you for your time.

Respectfully,

August Cook, President

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august cook design, inc. 1521 alton road, #363, miami beach, fl 33139 office: 305.535.6152 fax: 305.535.0024