2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachn

DOCUMENT # **P99000065725** Aug 04, 2000 8:00 am Secretary of State 1. Entity Name CAMVIEW, INC. 08-04-2000 90006 030 ***150.00 Principal Place of Business Mailing Address 2030 N.E. 31ST AVENUE 2030 N.E. 31ST AVENUE FT. LAUDERDALE FL 33305 FT. LAUDERDALE FL 33305 VARATORIA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HACKER, BRENDA Street Address (P.O. Box Number is Not Acceptable) 1500 N.W. 49TH STREET SUITE 608 FORT LAUDERDALE FL 33309 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 DATE Signature, typed or printed name of registered agent and title 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 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ■ Addition Change PD TITLE TITLE ☐ Delete NAME HACKER, BRUCE NAME STREET ADDRESS STREET ADDRESS 2030 N.E. 31ST AVENUE CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33305 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS 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

attachment # p9900065725 40071379

July 31, 2000

Florida Department of State Katherine Harris Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Please except this late payment for my Annual Corporate Report without the penalty for the following reasons:

Truth:

I am begging, pleading, and down on one knee, looking to kiss your feet if they were in front of me.

Typical rhetoric:

I am a new Corporation, just getting my act together and want to start doing things right.

I wasn't aware of the annual fee and didn't receive the first notice.

The penalty is severe and a major strain to a struggling new Corporation.

I now realize the reason for such a severe penalty is to encourage Corporations to file in a timely manner. In the future you can rest assured this Corporation will not find it's self in this predicament again.

Thank you,

Bruce Hacker

President CamView, Inc.

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