

05-15-2002 90101 013 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000076473
1. Entity Name
 New Enterprise Solutions, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 695 Central Ave. Suite, Apt. #, etc. Suite # 203 City & State St. Petersburg, FL Zip 33701 Country USA		3. Mailing Address 4903 Windmill Palm Terr. Suite, Apt. #, etc. City & State St. Petersburg, FL Zip 33703 Country USA	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3592134	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Louis E. RAMIREZ	
Street Address (P.O. Box Number is Not Acceptable) 4903 Windmill Palm Terr. NE	
City St. Petersburg	FL Zip Code 33703

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)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> <small>(See criteria on back)</small>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		
TITLE P	NAME Louis E. RAMIREZ	TITLE NAME
STREET ADDRESS 4903 Windmill Palm Terr. NE	STREET ADDRESS 4903 Windmill Palm Terr. NE	STREET ADDRESS NAME
CITY - ST - ZIP St. Petersburg, FL 33703	CITY - ST - ZIP St. Petersburg, FL 33703	CITY - ST - ZIP NAME
TITLE S	NAME Sandy K. Ramirez	TITLE NAME
STREET ADDRESS 4903 Windmill Palm Terr. NE	STREET ADDRESS 4903 Windmill Palm Terr. NE	STREET ADDRESS NAME
CITY - ST - ZIP St. Petersburg, FL 33703	CITY - ST - ZIP St. Petersburg, FL 33703	CITY - ST - ZIP NAME
TITLE NAME	STREET ADDRESS NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS NAME	STREET ADDRESS NAME	
CITY - ST - ZIP NAME	CITY - ST - ZIP NAME	
TITLE NAME	STREET ADDRESS NAME	
STREET ADDRESS NAME	STREET ADDRESS NAME	

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **SANDY RAMIREZ** **4/30/02** **727-521-6137**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)