**FILED** 

7/ Dale / 94/ 16/ 36/0

## 2004 HNIEGRM RUSINESS REPORT (HRR)

SIGNATURE:

1. Entity Nam	MENT # P99000 STMENTS CORPORATION	085847	(V)		Jul 24, 200 Secretary 07-24-2001 900	y of S	Stat	i <b>m</b> e	5496 AV
Principal Place of Business 625 ADMIRALTY PARADE NAPLES FL 34102		Mailing Address 625 ADMIRALTY PARADE NAPLES FL 34102							
2. Principal P	Place of Business	3. Mailing Address		1					1
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
City & State		City & State		4. FE	Number <b>59-3601338</b> :			plied For Applicable	]
Zip	Country	Zip C	ountry	<b>5.</b> Cer	tificate of Status Desired		. <b>75</b> Addi Required		
	6. Name and Address of Current Re	gistered Agent		7. Nan	ne and Address of New Re	gistered Age	nt		1-
			GO GRAI 5551 RI	(P.O. Box 17 FR 04EN	Number is Not Acceptable) ONN PERSON ON PERSON	501	É CRC		- -
NAPLES F	L 34106		City NAPLES	•		FL	3410	8	
Tax filing requirement and elects to do so.  After Septer			istered Agent signature requirements \$550.00 01 Fee will be \$750 0 Department of Signature requirements of Signature requi	0.00 ate	10. Election Campaign Fina Trust Fund Contribution.		<b>\$5.0</b> (Added	0 May Be to Fees	
11.	OFFICERS AND DI	RECTORS	12.	ADDI	TIONS/CHANGES TO OFFIC				1=
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVP MUTZ, O.U. 625 ADMIRALTY PARADE NAPLES FL 34102	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	CR2E034 (5/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	\ <u></u> *
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	
indicated of the co-	certify that the information supplied with the on this report or supplemental report is troporation or the receiver or trustee empow, or on an attachment with an address, with	ue and accurate and that my si ered to execute this report as re	onature shall have the	e same led	al effect as if made under or	ath: that I am a	an officer :	or director	

## IRIS INVESTMENTS CORPORATION

625 Admiralty Parade, West Naples, FL 34102 941-261-8600

July 11, 2001

Florida Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahasse, FL 32302-1500

Re:

2001 Uniform Business Report (UBR)

Document # P99000085847
IRIS Investments Corporation

Dear Division Representative:

I am in receipt of the enclosed 2001 Uniform Business Report for the above referenced corporation. Please note this is the first time that I was notified of the Report filing this year. Accordingly, I enclosed a check in the amount of \$158.75, being the annual dues of \$150 plus \$8.75 for a Certificate of Status.

On behalf of the Corporation, I respectfully request that you abate the \$400 late filing fee since I was unaware and did not receive the first notice. It is my understanding, based upon discussions with a Division of Corporation representative that under circumstances such as these, an abatement of penalty is warranted. Accordingly, I respectfully request the abatement.

Should you have any questions, please do not hesitate to contact the Corporation's attorney, Lester B. Law, or me. For your information, Lester's address and phone number are as follows:

Lester B. Law, Esq.
Grant, Fridkin, Pearson, Athan & Crown, P.A.
5551 Ridgewood Drive, Suite 501
Naples, Florida 34108
941-514-1000

I look forward to an expeditious handling of this matter and a positive outcome.

Sincerely,

O.U. Mutz President