## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 17, 2002 8:00 am Secretary of State

DOCUMENT # P99000098442			04-17-2002 90115 005 ***150.00	
MindDabble	or, Inc.			
DO NOT WRITE IN THIS SPACE			830796	
2. Principal Place of Business	3. Mailing Add \スイャ	IM 10+x 2+		
Suite, Apr. #, etc.	Suite, Apt. #		DO NOT WRITE IN THIS	SPACE
City & State Boca Raton FL	City & State	Raton FL	4. FEI Number 65- 0959 (79	Applied For Not Applicable
Zip Countr ろる4ろみ US		Country US A	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		Name	7. Name and Address of Current Registere	d Agent
DON	OT WRITE	Street Addre	rss (P.O. Box Number is Not Acceptable)	
IN THIS SPACE		W 104 St		
UBV 0 U	INO OF MOL	-		Tip Code
		Boo	ia Raton FL	Zip Code 33433
_	this statement for the purpose of c	hanging its registered office or reg	istered agent, or both, in the State of Florida.	
SIGNATURE AVILLAND	ton cio	May	~ 4-2-a	002
Signature, typed or printed na	me of registered agent and title if applicable.	(NOTE: Registered Agent signature re	quired when reinstating) DATE	
		and a second control of the second second	4 - M	
<ol> <li>This corporation is eligible to sat Tax filing requirement and elects (See criteria on back)</li> </ol>	s to do so.	uary 1 - May 1 Foo in \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 ock Payable to Department of	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
Tax filing requirement and elects (See criteria on back)  11.	s to do so.	After May 1, Fee Is \$550.00 Amended UBR is \$81.25 ock Payable to Department of	10. Election Campaign Financing Trust Fund Contribution.	J Added to Fees
Tax filing requirement and elects (See criteria on back)  11.  TIRE  NAME  Shawna All	S to do so.  OFFICERS AND DIRECTORS	After May 1, Fee Is \$550.00 Amended UBR is \$61.25	10. Election Campaign Financing Trust Fund Contribution.	J Added to Fees
Tax filing requirement and elects (See criteria on back)  11.  TITLE NAME STREET ADDRESS 12-1 nw 10-14 see	OFFICERS AND DIRECTORS	After May 1, Fee is \$550.00 Amended UBR is \$81.25 ock Payable to Department of TITLE NAME STREET ADDRESS	10. Election Campaign Financing Trust Fund Contribution.	J Added to Fees
Tax filing requirement and elects (See criteria on back)  11.  TITLE NAME STREET ADDRESS 12-1 nw 10-2 nc Boca Raban	OFFICERS AND DIRECTORS	After May 1, Fee Is \$550.00 Amended UBR to \$61.25 ock Payable to Department of TILL NAME STRET ADDRESS CITY ST- ZP	10. Election Campaign Financing Trust Fund Contribution.	J Added to Fees
Tax filing requirement and elects (See criteria on back)  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP BOCA Rahan TITLE V NAME PVILL RIVEY	OFFICERS AND DIRECTORS  Low	After May 1, Fee Is \$550.00 Amended UBR in \$81.25 ock Payable to Department of TILE NAME STRET ADDRESS CITY SI-7P TILE NAME	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees  (10701)
Tax filing requirement and elects (See criteria on back)  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP SOCA Rahan TITLE NAME STREET ADDRESS 12-4 nw 10-3m = Poice Rahan TITLE NAME STREET ADDRESS 12-4 nw 10-3m = STREET AD	OFFICERS AND DIRECTORS  Low St do so.  Characteristics  C	After May 1, Fee Is \$550.00 Amended UBR in \$81.25 ock Payable to Department of TILE NAME STRET ADDRESS CITY SI-7P TILE NAME STRET ADDRESS	10. Election Campaign Financing Trust Fund Contribution.	J Added to Fees
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Tax filing requirement and elects (See criteria on back)  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP BOCA Rabon NAME Aviel Alton STREET ADDRESS 124 nw 1024 5 CITY-ST-ZIP BOCA Rabon TITLE  THE BOCA Rabon THE BOCA Rabon THE	OFFICERS AND DIRECTORS  Low St do so.  Characteristics  C	After May 1, Fee Is \$550.00 Amended UBR to \$81.25 ock Payable to Department of TITLE AMME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP	10. Election Campaign Financing Trust Fund Contribution.	Added to Fees  CR2E034B (12/01)
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13. I hereby certify that the information supplied with this filling 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 of 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 butler like empowered.

SIGNATURE: .

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-2002

561-376-1177

Daytime Phone #