2002 UNIFORM BUSINESS REPORT (UBR)

Aug 18, 2002 8:00 am Secretary of State DOCUMENT# P99000098496 1. Entity Name 08-18-2002 90128 023 ***150.00 TYCKER, INC. Principal Place of Business Mailing Address 7748 TAFT ST 7748 TAFT ST PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0961082 Not Applicable Zip Country Country \$8.75-Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOGAN, EDWARD Street Address (P.O. Box Number is Not Acceptable) 7748 TAFT ST PEMBROKE PINES FL 33024 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (4/02) TITLE ☐ Delete TITLE Addition HOGAN, EDWARD NAME STREET ADDRESS 8992 S.W. 59 ST. STREET ADDRESS CITY-ST-ZIP COOPER CITY FL 33328 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS: STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Addition ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

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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

SIGNATURE:

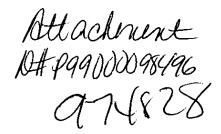
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changed, or on an attachment with an address, with all other-like empowered

07/15/02 954-680-5995

FILED





August 14, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Enclosed is a check for \$150 for my 2002 Uniform Business Report.

I am requesting that the \$400 late filing penalty be waived. I am a single person business, trying to start something that has been slow and expensive to get off the ground. The \$400 would be a major setback.

I did not notice the original form in the mail. I do realize that it is my responsibility to make sure the report is filed on a timely basis and I assure that it will be done on time next year as it was last year.

I appreciate your consideration of this matter.

Edward Hogan,

President, Tycker, Inc.