FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000101817

1. Entity Name

Thermay North, Inc.

FILED Jun 18, 2002 8:00 am Secretary of State

06-18-2002 90488 038 ***150.00

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Principal Place of Business 1270 (ARI G. Rose Hwy N. 3. Mailing Address				DO NOT WOLLD IN	TUIC CDACE		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number Applied For Not Applicable			
Hernando, the		Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
34446	USA_	<u></u>		7. Name and Address of Current Reg	stered Agent		
_ s. #.s	in a the term of		Name G	eorge H. Kontr	Atouris		
	DO NOT W	RITE	Street Address	Street Address (P.O. Box Number is Not Acceptable)			
	IN THIS SP	ACE	70	TO CHRI G. J.			
	1.0 10 10 10 10 10 10 10 10 10 10 10 10 10	'n	City	NANDO	FL Zip Cod 442		
			TECT	tered agent, or both, in the State of Florida			
SIGNATURE _	Signature, typed or printed name of registered agent reaction is elligible to satisfy its Intangible	and title if applicable. (NO	TE: Registered Agent signature requi	ired when reinstating) 10. Election Campaign Finance	DATE\$5.00 May Be		
Tax filing re (See criteri	quirement and elects to do so. a on back)	Amendo Make Check Paya	ed UBR is \$61.25 ble to Department of S	Trust Fund Contribution.	Added to Fees		
11.	OFFICERS AND	DIRECTORS	TITLE				
TITLE President George H. Kontratouris STREET ADDRESS 4270 CARI G. Rose Huy. N.			TITLE NAME STREET ADDRESS CITY-ST-ZIP				
CITY-ST-ZIP	HernANDO, 7L	34442	TITLE				
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13. Thereby 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 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:

ED NAME OF SIGNING OFFICER OR DIRECTOR

AHachnent 869536

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 5, 2002

THERMAX NORTH, INC. 4270 N. CARL G. ROSE HIGHWAY H HERNANDO, FL 34442

SUBJECT: THERMAX NORTH, INC. Ref. Number: P99000101817

Upon receipt of your letter and/or check(s) totaling \$150.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Please complete the enclosed Union Form Business Report.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Eula Peterson Document Specialist

Letter Number: 802A00036720

District of Comparations DO DOV 6997 Tollahagges Florida 99914

Attachment 869536/ # P99000101817

Thermax North, Inc. 4270 N. Carl G. Rose Hwy. Hernando, FL 34442

May 10. 2002

State of Florida
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Corporation Filing Forms - EIN 65-0972344

Enclosed please find a check for \$150 for my yearly corporation fees.

I did not receive your Profit Uniform Business/Annual Report forms. I tried to retrieve them from your website but the form would not download. Adobe errors occurred in trying to bring up the form.

I was misinformed of the actual due date. I understood it to be the 15^{th} , not the 1^{st} .

I sincerely apologize for my taxes being late, but as you can see, I had all good intentions to pay it by the $15^{\rm th}$.

Thank you for your consideration.

Sincerely,

George Kontrafouris, President, Thermax North

Jug Harry