**2001 UNIFORM BUSINESS REPORT (UBR)** SECRE THORNO 0 5265 BATE DOCUMENT #799000 \026 TALLAHASSEE, FLORIDA 01 JUL -6 PM 3: 29 FUN FRIENDS, INC. Principal Place of Business Mailing Address 3951 ROBERTS POINT RU. SAMO K0075728 SARASOTA, Fl. 34242 2. Principal Place of Business 3151 ROOCKH Pf Rd. Mailing Address 3951 Roberts Pl. Rd. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 0963599 SARASOTA SARASOTA Not Applicable SOLASOTA 342<u>42</u> 34241 \$8.75 Additional 5. Certificate of Status Desired SARASOTA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JUNITRO LUZIER, THOMAS B. ESQ. 3400 S. TAMIAM: TR. SNRASOTA FI. 34239 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, typed or plinted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2001 Fee will be \$550.00 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. PRESIDENT PARRY DIRCCTOR KARIN KERREVELD 3951 Roberts Point Rel. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME 3951 Roberts Point Rd STREET ADDRESS STREET ADDRESS SARASOTA FL. 34242 MRASOTA, FI. 34242 CITY-ST-7IP CITY - ST- 7IP Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-712 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change 🚺 Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 is supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the recover 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 changed, or on an attachment with an address, with all other like propowered.

SIGNATURE:

Attachment D#199000102653 AW16728

Florida Dept of State Uniform Business Report Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

I am\_only now sending this in\_due to confusion over last years UBR. The UBR for 2000 had to be mailed back and forth three times last year over minor issues and was only finally resolved on Jan 17, 2001. On Jan 18, 2001 I received letter# 001A00002885 which stated that UBR was due. Due to the issue only being resolved on Jan 17 by phone and receiving a letter on Jan 18, I got confused and disregarded the letter. I figured everything was resolved and that was just another letter on the same issue. I am sorry and in future I will not make the same mistake. I am a small startup business. Accounting and licensing are not my forte and sometimes confuse and frustrate me. I hope you can understand the confusion/mistake and please not assess me the late fee. My cash flow is very tight and I am struggling to stay in business. Thank you for understanding.

Sincerely,

Julian Parry President