

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90144 002 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000107448 1. Entity Name ONLYFROM.COM CORPORATION																											
Principal Place of Business 11306 STRATTON PARK DRIVE TAMPA, FL 33629		Mailing Address 11306 STRATTON PARK DRIVE 129320 TAMPA, FL 33629																									
2. Principal Place of Business 31 Davis Blvd. Suite, Apt. #, etc. B City & State Tampa, FL Zip 33606 Country USA		3. Mailing Address 31 Davis Blvd Suite, Apt. #, etc. B City & State Tampa, FL Zip 33606 Country USA																									
4. FEI Number 59-3649820		Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent MCBIRNIE, WILLIAM 11306 STRATTON PARK DRIVE TAMPA, FL 33617																									
7. Name and Address of New Registered Agent Name William McBirnie Street Address (P.O. Box Number is Not Acceptable) 31 Davis Blvd, Suite B City Tampa State FL Zip Code 33606		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 <i>W. Bruce McBirnie</i> DATE 4/29/03 (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when appointing))																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE CEO NAME MCBIRNIE, WILLIAM STREET ADDRESS 11306 STRATTON PARK DRIVE CITY-STATE-ZIP TAMPA, FL 33629 </td> <td style="width: 50%; padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE VP NAME PROVATAS, ANTONIA STREET ADDRESS 11306 STRATTON PARK DRIVE CITY-STATE-ZIP TAMPA, FL 33629 </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> </table>		TITLE CEO NAME MCBIRNIE, WILLIAM STREET ADDRESS 11306 STRATTON PARK DRIVE CITY-STATE-ZIP TAMPA, FL 33629	☐ Delete	TITLE VP NAME PROVATAS, ANTONIA STREET ADDRESS 11306 STRATTON PARK DRIVE CITY-STATE-ZIP TAMPA, FL 33629	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE CEO NAME William McBirnie STREET ADDRESS 31 Davis Blvd. Suite B CITY-STATE-ZIP Tampa, FL 33606 </td> <td style="width: 50%; padding: 2px;"> ☒ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-STATE-ZIP </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> </table>		TITLE CEO NAME William McBirnie STREET ADDRESS 31 Davis Blvd. Suite B CITY-STATE-ZIP Tampa, FL 33606	☒ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <i>W. Bruce McBirnie</i> William McBirnie DATE 4/29/03 TELEPHONE # 813785 6980 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																											

11032959



☒ CHECK HERE IF MAKING CHANGES

CP21034 (10/02)