


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

<b>DOCUMENT # S19926</b> 1. Entity Name <b>BACKSTREET, INC.</b>	
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FILED  
03 OCT 13 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>2318 MANATEE AVE W</b> Suite, Apt. #, etc.	3. Mailing Address <b>2318 MANATEE AVE W</b> Suite, Apt. #, etc.
City & State <b>BRADENTON, FL</b>	City & State <b>BRADENTON, FL</b>
Zip <b>34205</b> Country <b>US</b>	Zip <b>34205</b> Country <b>US</b>

100024212031  
10/28/03--01062--015 \*\*150.00

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<b>DO NOT WRITE IN THIS SPACE</b>	4. FEI Number <b>65-0249112</b>		Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
	7. Name and Address of Current Registered Agent		
	Name <b>DAVID M. LYNCH</b> Street Address (P.O. Box Number is Not Acceptable) <b>2318 MANATEE AVE W</b> City <b>BRADENTON</b> FL Zip Code <b>34205</b>		

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  10/9/03  
Signature, typed or printed name of registered agent and date is applicable. (NOTE: Registered Agent signature required when reappointing.) DATE

January 1 - May 1: Fee is \$150.00  
After May 1: Fee is \$550.00  
Amended UBR is \$01.25  
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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(P/D) DAVID LYNCH 630 CASA BELLA DRIVE BRADENTON, FL 34209	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for an 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 on an attachment with an address, with all other like empowerments.

SIGNATURE:  10/09/03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

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AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION. I ALSO STATE THAT I NEVER RECEIVED ANY CORRESPONDECE FROM YOUR OFFICE REGARDING THE 2003 UBR.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

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CORDIALLY,

  
DAVID LINCH (PRESIDENT)