FILED
Jul 28, 2003 8:00 am
Secretary of State
07-28-2003 90148 002 ***550.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S22616

1. Entity Name
FOUR O FOUR CORPORATION

Principal Place of Business	Mailing Address
% GEORGE ABBOTT 1285 SOUTH OCEAN BLVD. PALM BEACH, FL 33480 US	% GEORGE ABBOTT 1285 SOUTH OCEAN BLVD. PALM BEACH, FL 33480 US

2. Principal Place of Business	3. Mailing Address
c/o JANICE ABBOTT	c/o JANICE ABBOTT
Suite, Apt. #, etc. STE 5F 330 SOUTH OCEAN BLVD.	Suite, Apt. #, etc. 330 SOUTH OCEAN BLVD, STE 5F
City & State PALM BEACH, FL	City & State PALM BEACH, FL
Zip 33480 Country USA	Zip 33480 Country USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0245948 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ABBOTT, GEORGE 1285 SOUTH OCEAN BLVD PALM BEACH, FL 33480	Name JANICE ABBOTT Street Address (P.O. Box Number Is Not Acceptable) 330 SOUTH OCEAN BLVD, SUITE 5F City PALM BEACH FL Zip Code 33480

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 Janice Abbott 7-23-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW!!! FEE $150.00
After May 1, 2003 Fee will be $550.00
Late Amended UBR is $400.00
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVD ABBOTT, GEORGE 1285 S. OCEAN BLVD. PALM BEACH, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVTSD ABBOTT, JANICE 330 SOUTH OCEAN BLVD, STE 5F PALM BEACH, FL 33480	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST ABBOTT, GEORGE 1285 S. OCEAN BLVD. PALM BEACH, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ABBOTT, GREGORY 330 SOUTH OCEAN BLVD, SUITE 5F PALM BEACH, FL 33480	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR ABBOTT, GREGORY 1285 S OCEAN BLVD PALM BCH, FL 33480	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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: Janice Abbott 7-23-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #