2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

S45522 DOCUMENT

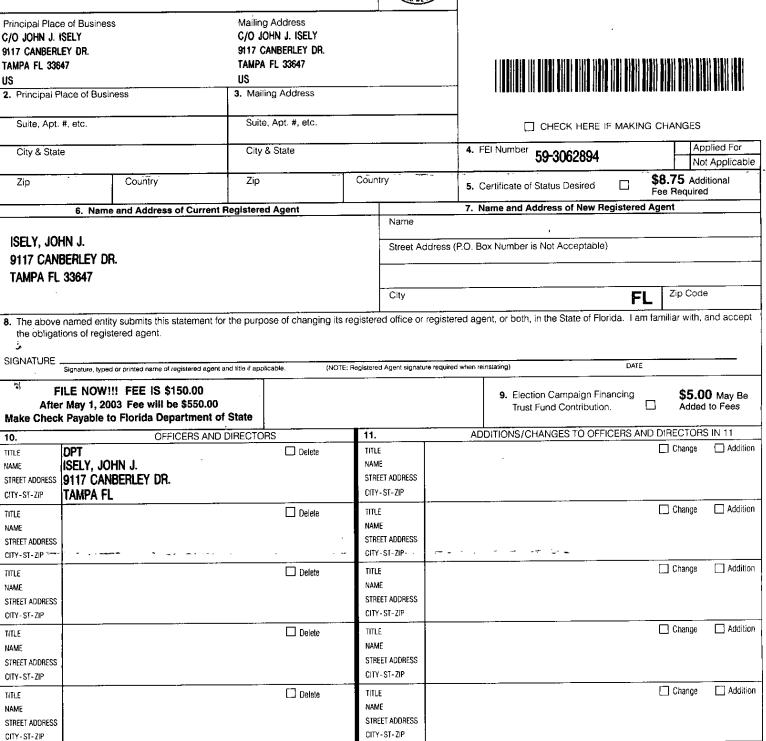
1. Entity Name

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

YOUR ACCOUNTING DEPT., INC.



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:

☐ Defete

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

Change

☐ Addition

FILED

Jan 06, 2003 8:00 am Secretary of State

01-06-2003 90043 007 ***150.00

:R2E034 (10/02)