`2002 Uniform Business Report (UBR) DOCUMENT # S87561 1. Entity Name 02 APR 18 PM 12: 20 ALLEN S. BROWN P.A. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address % ALLEN S. BROWN % ALLEN S. BROWN 333 WEST VENICE AVE 333 WEST VENICE AVE VENICE FL 34283-2004 VENICE FL 34285-2004 HS 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. /P.O. Box 19467 Applied For City & State City & State 59-3086250 Sarasota Florida Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 34276 Sarasota 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BROWN, ALLEN S. Street Address (P.O. Box Number is Not Acceptable) 333 WEST VENICE AVE VENICE FL 34285 City Zip Code FL 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. (NOTE: Registered Agent signature required when reinstalling) 9. This corporation is aligible 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, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ППЕ ☐ Change Addition HILE ☐ Delete 700005393507 NAME BROWN, ALLEN S NAME 333 W VENICE AVE -04/30/02--01060-STREET ADDRESS STREET ADDRESS CIY-SI-ZIP CITY-ST-ZIP venice fl Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-7IP CITY-ST-ZIP ☐ 'Change Delete nn F TŘE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Celeta TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change ☐ Addition Delete TOTE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST. 7P Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P 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 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 flustee 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 altachm SIGNATURE

Affachment ALLEN S. BROWN P.A.

336834

Attorney At Law

DOC#587561

Telephone (813)-485-1154 FAX (813)-484-9864

333 West Venice Avenue Venice, Florida 34285

February 25, 2002

Department Of State Division Of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: Filing Fee for 2002 Uniform Business Report

Please pay \$71.25 of the 2002 Uniform Business Report filing fee of \$150.00 from my closed electronic filing account # 252 which has a balance of \$71.25. Enclosed is a check for the balance of the filing fee in the amount of \$78.75. Should there be any questions or problems with using the funds in the electronic filing account, please call me immediately.

Sincerely,

Allen S. Brown Attorney At Law

enc. 2002 UBR