## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # V05582** Aug 11, 2000 8:00 am Secretary of State 1. Entity Name ALANNA VENTURES, INC. 08-11-2000 90060 001 \*\*\*150.00 08-11-2000 90060 002 \*\*\*400.00 Principal-Place of Business Mailing Address 9 SURREY PLACE ISLA DEL SOL 204 P 6287 BAHIA DEL MAR CIRCLE ST. JOHN'S, NEWFOUNDLAND A1A .4R5 ST. PETERSBURG FL 33715 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3099691 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GRIFFITHS, DR. ALAN K. Street Address (P.O. Box Number is Not Acceptable) 9 SURREY PLACE ST. JOHN'S NEW FOUNDLAND CANADA FL A1A-557 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00:May-Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. Will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change ☐ Addition TITLE ☐ Delete TITLE GRIFITHS, ALAN K NAME NAME 204P 6287 ISLA DEL SOL STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33715 CITY-ST-7IP CITY-ST-ZIP **VPS** ☐ Addition Change TITLE ☐ Delete TITLE GRIFFITHS, ANNE S NAME NAME STREET ADDRESS 204P 6287 ISLA DEL SOL STREET ADDRESS CITY-ST-ZIP ST PETERSBURG FL 33715 CITY-ST-ZIP ☐ Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete Change Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 trustee 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

Daytime Phone \*

Daytime Phone \*

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9 Survey Place Sit John's Newfoundland Canada AIA SA7 July 19,2000. DOG# V05582

I have just received notice that progressed my 2000 Uniform Business Refort was not processed and that I am now liable to pay an additional \$400.

I ask that you take the following into consideration Most importantly, I did mail vey inital fee of \$1,50 on April 9. This was mailed from a sub-fost-office at Isla del Sol in St. Pete. I enclose a copy of ney our records in which you will see don't I noted payment. The Report form goes to my mailing address in Canada. A friend who is a chartered accountent and a notary public brought it to me while visiting me in St Pete. She recalls me going to the post office to mail it. I cannot gnarantee it reached you, but it seems possible it was mislaid in Tallahassee. I mould be

mast grateful if you would investigate