## FOR PROFIT CORPORATION UNPORM BUSINESS REPORT (UBR)

FILED DOCUMENT # V 60867 02 OCT 29 AM II: 32 1. Entity Name VENTURE RESEARCH, FMC. SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE Principal Place of Business 2600 NW 55th CT. WATERSIDE OF DO NOT WRITE IN THIS SPACE Saite City & State 4. FEI Number Applied For audernale OCA RATON <u>65-0</u>35379 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent MICHAEL DEMED DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE WATERSINE 02. 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 10/16/02 (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61,25 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE TITLE MICHAEL DEMEA NAME NAME 159 WHTERSIDE OR. \*\*150.00 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME : STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-7(P TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE TITLE NAME NAME STREET DRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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13. Thereby certify that the information supplied with this filling 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 on an attachment with an address, with all other like empowered

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MICHAEL DEMEO 10/1402 954

Thomas J. Moore, Esq. 2600 NW 55<sup>th</sup> Court #235 Fort Lauderdale, FL 33309 954-735-5557 561-523-4214

October 23, 2002

In the

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Venture Research Inc.

To Whom It May Concern:

Enclosed please find a cashiers check in the amount of %150.00. The same representing the Fee due for 2002. Additionally, I am asking for a waiver of the penalty fee for late filing as my client, Michael J. DeMeo, President of Venture Research, Inc., did not receive the forms or notice at the mailing address provided to the State. Please advise me immediately if there is a problem with this waver.

Thomas J. Moore, Esq.

Staff Counsel .