## FOR PROFIT CORPORATION

**UNIFORM BUSINESS REPORT (UBR)** DOCUMENT #-1/Lelalo33

Stiletto Inc.

## **FILED** May 10, 2002 8:00 am Secretary of State

05-10-2002 90015 030 \*\*\*150.00

DO NOT WRITE IN THIS SPACE 80093670 Principal Place of Business STREET Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Numbe Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 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 1 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be (See criteria on back) Trust Fund Contribution. П Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE CR2E034B (12/01) NAME DONNAR GOLD NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DO-NOT-WRITE CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP T(T) F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE

NAME

STREET ADDRESS

CITY-ST-ZIP

<sup>13.</sup> 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 on an