

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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03 SEP 22 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000080794

1. Entity Name
TANSON CORPORATION



Principal Place of Business
**C/O NO WAY JOSE
7001 N. FEDERAL HWY
BOCA RATON FL 33487
US**

Mailing Address
**C/O NO WAY JOSE
7001 N. FEDERAL HWY
BOCA RATON FL 33487
US**



2. Principal Place of Business
C/O CRABBY JACKS

3. Mailing Address
C/O CRABBY JACKS

Suite, Apt. #, etc.
7001 N. Federal Hwy

City & State
BOCA RATON, FL

Zip
33487

Country
US

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**YUCAJACK INC.
7001 N. FEDERAL HWY.
BOCA RATON FL 33487**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STANTON, ROBERT P MR. 1015 S. FEDERAL HWY. DEERFIELD BEACH FL 33441 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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[Handwritten Signature]

300023369613
09/26/03- 01083--015 **750.00

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: **SIGNATURE ROBERT P STANTON** 8-7-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)