2001 UNIFORM BUSINESS REPORT (UBR)

Jun 08, 2001 8:00 am DOCUMENT # 227168 **Secretary of State** 1. Entity Name DADECO INVESTMENT CORP. 06-08-2001 90160 004 ***550 00 Principal Place of Business Mailing Address 5722 S FLAMINGO ROAD 5722 S. FLAMINGO ROAD SUITE 333 SUITE 333 554197 FORT LAUDERDALE FL 33330 FORT LAUDERDALE FL 33330 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-6158372 Not Applicable Zip Country 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 Nan e UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES ST STE 105 TALLAHASSEE FL 32301 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. (NOT Registered Agent signature required when reinstating) DATE FILE NOW 1 FEE IS \$150.00 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 MAY 1, 20 11 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payal le to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Delete TITLE ☐ Change ☐ Addition SHEARER, BARBARA NAME STREET ADDRESS STREET ADDRESS 5722 S. FLAMINGO ROAD, STE 333 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33330 STD ☐ Delete Change ☐ Addition BAILEY, ELIZABETH NAME STREET ADDRESS STREET ADDRESS 5722 S. FLAMINGO ROAD, SUITE 333 CITY-ST-ZIP PLANTATION FL 33330 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME ROGERS, ROY STREET ADDRESS 5722 S. FLAMINGO ROAD, SUITE 333 STREET ADDRESS CITY-ST-ZIE FORT LAUDERDALE FL 33330 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HTLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered.

13. I hereby certify that the information supplied with this filing does not qualify for indicated on this report or supplemental report is true and accurate and that not 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 or supplemental report is true and accurate and that not 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 or supplemental report is true and accurate and that not 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 or supplemental report is true and accurate and that not 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 or supplemental report is true and accurate and that not 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.

FILED