2000 UNIFORM BUSINESS REPORT (UBR)

May 08, 2000 8:00 am Secretary of State DOCUMENT # 234030 BAHAMA EQUIPMENT CO 05-08-2000 90169 028 ***158.75 Principal Place of Business Mailing Address 1400 ALABAMA AVE 1400 ALABAMA AVE **STF 19 STE 19** W PALM BCH FL 33401 W PALM BCH FL 33401-7048 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0152705 Not Applicable Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BURKHARDT, VINCENT G. Street Address (P.O. Box Number is Not Acceptable) 1400 ALABAMA AVE STE 20 WEST PALM BEACH FL 33402 Zip Code City 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. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change TITLE ☐ Delete TITLE BURKHARDT, VINCENT G. NAME NAME 1400 ALABAMA AVE STE 20 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL Change ☐ Addition Delete TITI F TITLE BURKHARDT, SHARON H NAME NAME STREET ADORESS STREET ADDRESS 1400 ALABAMA AVE., #20 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL Vice President a Director Change ☐ Delete TITLE TITLE HAYNES, DENNIS -NAME Haynes Dennis 1400 Alabama Avenue #20 West Palm Beach, FL 33401 STREET ADDRESS STREET ADDRESS 1400 ALABAMA AVENUE #20 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

04/25/00 561 659-1400

Change

☐ Addition