2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 267363 1. Entity Name MART-ONE, INCORPORATED Principal Place of Business Mailing Address 502 BEN CHRISTOPHER RD. 240 ALABAMA STREET COLUMBUS MS 39702-5204 P.O. BOX 521

Jan 14, 2000 8:00 am Secretary of State 01-14-2000 90010 005 ***150.00

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S. Name and Address of Current Registered Agent	City & Stat	е		City & State			4. F	El Number 59-1001182		h	·	
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STIVERS, JOHN E. BAY POINT PANAMA CITY BCH. FL. 39701 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 Fionda. SIGNATURE Signature, hydroid or perted make of registered agent and for if supficions (OTIT: Pregnature Agent supmisser required where well-state) DATE 9. This corporation is eligible to satisfy its intangible Tax ling opquiement and elects to do so. After MAY 1, 2000 Fee will be \$550,00 After MAY 1, 2		6. Name and A	Address of Current Re	egistered Agent -	_	-	7. h	Name and Address of New Re	gistered	Agent]
BAY POINT PANAMA CITY BCH. FL. 39701 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. 8. This above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 9. This corporation is elligible to satisfy its intangible Tax fluing requirement and elects to do no. After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State on Book (See criteria no face). 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 25. SINEET ADDRESS 25. SINEET ADDRES		•				Name						l
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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.

SIGNATURE:

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