FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State
05-02-2002 90047 023 ***158.75

DOCUMENT # 344938

1. Entity Name
FUN TIME INTERNATIONAL, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1101 S.W. 15th ST	1101 S.W. 15th ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DEERFIELD BEACH FL	City & State: DEERFIELD BEACH FL
Zip: 33441-6241 Country: USA	Zip: 33441-6241 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2453165 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required.

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: PLETTS, DONALD C.

Street Address (P.O. Box Number is Not Acceptable): 1101 S.W. 15th ST.

City: DEERFIELD BEACH FL Zip Code: 33441-6241

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. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PLETTS, DONALD C.
STREET ADDRESS	1101 S.W. 15th ST.
CITY-ST-ZIP	DEERFIELD BEACH FL 33441-6241
TITLE	STD
NAME	GARWOOD, JANET
STREET ADDRESS	410 N. MILL ST / P.O. BOX 3889
CITY-ST-ZIP	ASPEN CO 81612
TITLE	ASD
NAME	LANDAU, CAROL
STREET ADDRESS	704 NORTH ROAD
CITY-ST-ZIP	BOYNTON BEACH FL 33435
TITLE	
NAME	
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DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Janet Garwood JANET GARWOOD 4-15-02 970 925 8940 x290
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #