2001 UNIFORM BUSINESS REPORT (UBR)

Jul 05, 2001 8:00 am **Secretary of State DOCUMENT # 419146** 06-14-2001 90012 028 ***150.00 B & B BOOTERY, INC. 07-05-2001 90006 011 ***400.00 Principal Place of Business Mailing Address 311 WEST VENICE AVENUE 311 WEST VENICE AVENUE VENICE FL 34285 VENICE FL 34285 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 59-1440846 Not Applicable Zip Zio Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BORUFF, GARY C Street Address (P.O. Box Number is Not Acceptable) 311 W VENICE AVE VENICE FL 34285 City 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, (NOTE: Registered Agent signature required when reinstating) DATE, 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Addition BORUFF, GARY C. NAME NAME STREET ADDRESS 311 WEST VENICE AVE. STREET ADDRESS CITY-ST-ZIP VENICE FL CITY-ST-7IP TITLE TD Delete TITLE ☐ Change ☐ Addition NAME BORUFF, PATRICIA J. NAME STREET ADDRESS 311 WEST VENICE AVE. STREET ADDRESS CITY-ST-ZIP VENICE FL CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP DT) F ☐ Delete TITLE [7] Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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 they seewer 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 6-6-01

CITY-ST-ZIP

FILED

Hachmen,

31/ SE W. VENICE AVE.

,