2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # 446763 Aug 02, 2000 8:00 am Secretary of State 1. Entity Name NEO'S OF FLORIDA, INC. 08-02-2000 90005 044 ***150.00 Principal Place of Business Mailing Address 46 N. WASHINGTON BLVD., #27 46 N. WASHINGTON BLVD. #27 SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1520033 Not Applicable Country \$8.75_Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BROWNING, GEORGE Street Address (P.O. Box Number is Not Acceptable) 46 N. WASHINGTON BLVD., #27 SARASOTA FL 34236 Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 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 11. OFFICERS AND DIRECTORS TITLE Change ☐ Addition TITL F ☐ Delete **NEOFOTIS. GEORGE P** NAME NAME RT 1 BOX 166 B STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P **BUENA VISTA VA 24416** ☐ Change TITLE ☐ Delete TITLE **NEOFOTIS. PATRICIA A** NAME NAME RT 1 BOX 166 B STREET ADDRESS STREET ADDRESS CITY-ST-7IP **BUENA VISTA VA 24416** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE 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 ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filling 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.

LAW OFFICES

Attachment

446763 D6575901

GEORGE BROWNING III, P.A.

46 N. WASHINGTON BLVD., SUITE 27

SARASOTA, FLORIDA 34236

July 24, 2000

(941) 366-2782 FAX: (941) 364-9898

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sirs:

Enclosed is the annual report for Neo's of Florida, Inc. I did not receive the initial form for filing to the best of my knowledge.

Please waive the penalty and accept the check for $$150^{\$}$ which is enclosed.

Thank you.

Very truly yours

George Browning III