2002 UNIFORM BUSINESS REPORT (UBR)

Mar 22, 2002 8:00 am Secretary of State **DOCUMENT # 747528** 1. Entity Name 03-22-2002 90044 020 ****61.25 LATVIAN ASSOCIATION OF SOUTH FLORIDA, INC. Mailing Address Principal Place of Business BERZINS LUDIS BERZINS LUDIS 1335 RODMAN STREET 1335 RODMAN STREET HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 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 59-1918063 Not Applicable \$8.75 Additional Zip Zip Country Country 5 Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) BERZINS, LUDIS 1335 RODMAN ST HOLLYWOOD FL 33019 City Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition PD TITLE TITLE ☐ Delete BERZINS, LUDIS NAME NAME STREET ADDRESS STREET ADDRESS 1335 RODMAN ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Addition ☐ Delete TITLE ☐ Change BRIEZE, MILDA NAME NAME STREET ADDRESS STREET ADDRESS 4305 E TRADEWIND CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33308 ☐ Change ☐ Addition ☐ Delete TITLE TITLE BRENDE, DZIDRA NAME NAME STREET ADDRESS STREET ADDRESS 134 ONE 27TH WAY CITY-ST-7IP CITY-ST-ZIP POMPANO BEACH FL 33062 ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME arvida, Brende NAMÉ STREET ADDRESS STREET ADDRESS 1340 NE 27 WAY CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33062 ☐ Change Addition TITLE ☐ Delete TITLE NAME vents, Janis STREET ADDRESS STREET ADDRESS 1427 E HILLSBORO BLVD CITY-ST-ZIP CITY-ST-ZIP Deerfield BCH fl ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

bodauklakwared

4-5-2002 954-963-3060

FILED