2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F93000003324 Feb 20, 2000 8:00 am **Secretary of State** DESJARDINS FSB HOLDINGS, INC. 02-20-2000 90054 008 ***150.00 Principal Place of Business Mailing Address 1001 EAST HALLANDALE BEACH BLVD. 1001 EAST HALLANDALE BEACH BLVD. HALLANDALE FL 33009 HALLANDALE FL 33009-4429 **711033** 2. Principal Place of Business 3. Mailing Address 7800 W. OAKLAND PARK BLVD. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE BLDG. "G" City & State SUNRISE, FLORIDA Applied For City & State 4. FEI Number 65-0416808 Not Applicable Country USA Zip Country \$8.75 Additional 33351 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PCD Change ☐ Addition ☐ Delete TITLE TITLE BOUCHER, RENALD MAME NAME STREET ADDRESS 100 DES COMMANDEURS AVE. STREET ADDRESS CITY-ST-ZIP LEVIS, QUEBEC, CANADA CITY-ST-ZIP Change ☐ Addition Delete TITLE MORIN, BRUNO NAME STREET ADDRESS STREET ADDRESS 1 COMPLEXE DESJARDINS, 39TH FLOOR CITY-ST-ZIP CITY-ST-ZIP MONTREAL, QUEBEC, CANADA ☐ Delete ☐ Change ☐ Addition TITLE ROBIN, REGIS NAME NAME STREET ADDRESS STREET ADDRESS 2000 DES RECOLLETS BLVD, P. O. BOX 1000 CITY-ST-ZIP CITY-ST-ZIP TROIS-RIVIERES QU CANAD ☐ Change Addition TITI F ☐ Delete TITLE ROBITAILLE, PIERRE NAME NAME STREET ADDRESS STREET ADDRESS 100 DES COMMANDEURS AVE CITY-ST-ZIP CITY-ST-ZIP LEVIS QU CANAD TITLE ☐ Change Addition ☐ Delete TITLE LANGELIER, JEAN-GUY NAME NAME 1 COMPLEXE DESJARDINS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MONREAL QUE CA

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

YVES, LAVOIE

681 ST-GERMAIN BLVD. W.

RIMOUSKI, QUE. CA

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Change

Addition