FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 29, 2002 8:00 am Secretary of State DOCUMENT # G30561 1. Entity Name 01-29-2002 90062 037 ***150 00 SOUTH SHORE ENTERPRISES, INC. Principal Place of Business Mailing Address 3370 SW 15TH ST 3370 SW 15TH ST DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 US US 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 59-2274888 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHORE, TERRY Street Address (P.O. Box Number is Not Acceptable) 3370 SW 15TH STREET **DEERFIELD BEACH FL 33442** City Zip Code 8. The above named entity supmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1/14(0) SIGNATURE Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Addition Change SHORE, TERRY NAME NAME STREET ADDRESS 3370 SW 15TH STREET STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL CITY-ST-ZIP **VST** Detete TITLE Change ☐ Addition NAME SHORE, VICKI NAME STREET ADDRESS 3370 SW 15TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL ~ Change TITLE ☐ Delete TITLE ☐ Addition 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-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. 3370 SW 15th Street

Deerfield Beach, FL 33442 (954)421-1373 (954)421-9007 FAX /4(O/

Date

Daytime Phone #