2001 UNIFORM BUSINESS RIBORT (UBR) May 07, 2001 8:00 am Secretary of State DOCUMENT # K33980 1. Éntity Name S.N.D.P. TRADING, INC. 5-07-2001 90017 025 ***150.00 Principal Place of Business Mailing Address % STANLEY PITTNER STANLEY PITTNER 1013 SW 18TH TERRACE 1013 SW 18TH TERRACE CAPE CORAL FL 33991 CAPE CORAL FL 33991 2. Principal Place of Business 3. Mailing Address Ave. 3300 Central P.O. BOX 51408 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Myers City & State 4. FEI Number Applied For 65-0082376 FL. FL Fort Miers Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 3994 USA us4 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PITTNER, STANLEY Street Address (P.O. Box Number is Not Acceptable) 1013 SW 18TH TERRACE CAPE CORAL FL 33991 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) 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, 2001 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) Change ☐ Addition ☐ Delete TITLE TITLE PITTNER, STANLEY NAME NAME 1013 SW 18TH TERRACE ي STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33991 ☐ Delete TITLE ☐ Change ☐ Addition TITLE PITTNER, DANIEL NAME NAME 1013 SW 18TH TERRACE STREET ADDRESS STREET_ADDRESS CITY-ST-ZIP CAPE CORAL FL 33991 CITY-ST-ZIP ☐ Delete T/T/ F Change TITLE ☐ Addition PITTNER, STANLEY J NAME PITTUER STAULEY I NAME STREET ADDRESS 1013 SW 18TH TERRACE STREET ADDRESS 3300 Central Ave. CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33991 ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS 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 trystee 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 title empowered. 4-25-01 941-850-3872 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR