FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 28, 2003 8:00 am Secretary of State K99465 DOCUMENT # 04-28-2003 90305 035 ***150.00 1. Entity Name ALTAMONTE FOOD & FUEL, INC. Principal Place of Business Mailing Address 713 GOLFPOINT DR. 713 GOLFPOINT DRIVE 11020118 WINTER SPRINS FL 32701 WINTER SPRINGS FL 32708 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 22-2988621 Not Applicable Zip Country Country Zip \$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 KAREN RUTIGLIANO Street Address (P.O. Box Number is Not Acceptable) 713 GOLFPOINT DRIVE WINTER SPRINGS FL 32708 City Zip Code 8. The above named entity submite this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed frame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE.NOW!!! FEE 3\$ \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee vill be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State SOFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Change Addition TITLE Delete NAME RUTIGLIANO, CARLO NAME STREET ADDRESS 713 GOLFPOINT DRIVE STREET ADDRESS WINTER SPRINGS FL CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change Addition NAME WISEMAN, BARBARA NAME STREET ADDRESS 704 IRONWOOD CT STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS FL CITY-ST-ZIP TITLE ☐ Delete TITLE - ---☐ Change Addition NAME WISEMAN, DONALD A. NAME STREET ADDRESS STREET ADDRESS 704 IRONWOOD CT CITY-ST-ZIP CITY-ST-7IP WINTER SPRINGS FL TITLE ☐ Delete TITLE ☐ Change Addition RUTIGLIANO, KAREN NAME NAME STREET ADDRESS 713 GOLFPOINT DRIVE STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS FL CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 607, 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

SIGNATURE: