2001 UNIFORM BUSINESS REPORT (UBR)

May 10, 2001 8:00 am Secretary of State DOCUMENT # N9700006381 PLANTATION ECONOMIC DEVELOPMENT, INC. 05-10-2001 90122 046 ****70 00 Principal Place of Business Mailing Address 4061 N.W. 16TH ST. 4061 N.W. 16TH ST. LAUDERHILL FL 33313 LAUDERHILL FL 33313 2. Principal Place of Business 3. Mailing Address IMHODA Sangerling Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For reston 65-0792593 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) FERNANDEZ, HENRY 4061 N.W. 16TH ST. LAUDERHILL FL 33313 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution, PEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TITLE Addition ☐ Delete ☐ Change FERNANDEZ, HENRY NAME STREET ADDRESS 4061 N.W. 16TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33313 TITLE TITLE Steve Allison X Delete ☐ Change X Addition SNELL, ANNE NAME 4731 N.W. 10thct STREET ADDRESS 4061 N.W. 16TH ST. STREET ADDRESS Plantation, 71 CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33313 TITLE ☐ Delete TITLE Addition SIMS, EDDIE NAME 4061 N.W. 16TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33313 ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 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

SIGNATURE:

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