## 2001 UNIFORM BUSINESS REPORT (UBR) Apr 25, 2001 8:00 am Secretary of State DOCUMENT # P0000054889 1. Entity Name COLAS INTERNATIONAL, INC. 04-25-2001 90268 001 \*\*\*150.00 04-25-2001 90268 002 \*\*\*\*\*8.75 Principal Place of Business Mailing Address 1761 W. HILLSBORO BLVD. #313, 1761 W. HILLSBORO BLVD. #313 DEERFIELD FL 33442 DEERFIELD FL 33442 38979 2. Principal Place of Business 3. Mailing Address 761 W. HILSBORD BLVD 761 W. HILISBORD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 65-1020649 DEERFIELD Not Applicable \$8.75 Additional 5. Certificate of Status Desired US A Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ESTRIPLET, MARIE CHANTAL Street Address (P.O. Box Number is Not Acceptable) 1761 W. HILLSBORO BLVD. #313 DEERFIELD FL 33442 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) DATE 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE COLAS, ALOIMON NAME NAME STREET ADDRESS 1761 W. HILLSBORO BLVD. #313 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD FL 33442 ☐ Addition TITLE ☐ Delete Change NAME ESTRIPLET, MARINE CHANTEL NAME STREET ADDRESS 1761 W. HILLSBORO BLVD. #313 STREET ADDRESS CITY-ST-ZIP DEERFIELD FL 33442 CITY-ST-ZIP ☐ Addition TITLE Change Delete TITLE. NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE 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.

DIDE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

□ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: MARIE CHANTAL ESTRIPLET Movie Phontal Estiflet March 12 8001 (561) 716-038