2001 UNIFORM BUSINESS REPORT (UBR) May 22, 2001 8:00 am DOCUMENT # 470060 Secretary of State PARMALANO COMPARATION 05-22-2001 90042 001 \*\*\*150.00 GRANA Mailing Address Po. Box wy Principal Place of Business 1031 IVES Drifty ROPD SUITE# 2 VP YUTHANOVER ST. DEOLS ONY NORTH MIRMI BERGH FL 33179 -2. Principal Place of Business 3. Mailing Address AS ABOVE AS" ABIVE DO NOT WHITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 65-1061028 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AUTHOU J. FILITI J. F/1/1 BROWNER YOTH IT TOURS EMONTORN FILL 17/20 Zin 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 ナードリカ FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intengible 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 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE PRESIDENT ☐ Change Addition CR2E034 (11/00 ☐ Delete TITLE NAME ANTHONY J: FILITI
380V NE VUTTH ST-TOWER - TOOS
BYENTURE FL. 33180 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEUNE TAN Delete TITLE Change Addition TITLE MATHON, J. FILITI NAME NAME 38 UV NE YOUTH ST. TOWENTY- YOUL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVEN TUPP, FL. 33 180 TITLE ☐ Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 ANTHONY J. FILITI Y-W- UPPI SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR