2001 UNIFORM BUSINESS REPORT (UBR)

Jan 26, 2001 8:00 am Secretary of State DOCUMENT # P93000086814 BAMA SEA PRODUCTS, INC. 01-26-2001 90010 019 ***150.00 Principal Place of Business Mailing Address 756 - 28TH ST S 756 - 28TH ST S ST. PETERSBURG FL 33712 ST. PETERSBURG FL 33712 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3228112 Not Applicable Zip Country Zip Country \$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 Name STÉPHENS, JOHN Street Address (P.O. Box Number is Not Acceptable) 756 - 28TH ST S ST. PETERSBURG FL 33712 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!!! 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 TITLE ☐ Delete TITLE Change ☐ Addition STEPHENS, JOHN NAME NAME STREET ADDRESS 24 PARADISE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TREASURE ISLAND FL TD TITLE ☐ Delete ☐ Change Addition NAME CONNER, JOE NAME STREET ADDRESS 756 - 28TH ST S STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33712 CITY-ST-ZIP D۷ ☐ Delete TITLE TITLE ☐ Addition ☐ Change NAME JACKSON, JOHN NAME STREET ADDRESS 756 - 28TH ST S STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33712 CITY-ST-ZIP D TITLE ☐ Delete TITLE Change ☐ Addition NAME **GODFREY** NAME STREET ADDRESS 4297 BUFORD DR STE A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BUFORD GA** TITI F ☐ Delete ☐ Addition TITLE Change NAME SCHEER, JERALD S NAME STREET ADDRESS 1177 SOUTHGATE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHARLESTON SC DV TITLE ☐ Delete TITLE Change ☐ Addition NAME PARKS, MICHAEL NAME STREET ADDRESS STREET ADDRESS 756 - 28TH ST S CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33712

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 attackment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRIVED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-01

424-324-3444

Daytime Phone #

FILED