2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PE

TED NAME OF SIGNING OFFICER OR DIRECTO

Apr 09, 2001 8:00 am Secretary of State DOCUMENT # P9400069324 1. Entity Name SCHEU AND SCHEU, INC. 04-09-2001 90064 018 ***150.00 Principal Place of Business Mailing Address SCHEU & SCHEU, INC SCHEU & SCHEU, INC 48 CORAL WAY 48 CORAL WAY UUU43433 KEY LARGO FL 33037 KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address 106240 Overseas Huvi Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0511651 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHEU, BARBARA Street Address (P.O. Box Number is Not Acceptable) 298 BUTTONWOOD DRIVE KEY LARGO FL 33037 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 DATE (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 After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME SCHEU, WILLIAM NAME STREET ADDRESS STREET ADDRESS 298 BUTTONWOOD DR. CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL ☐ Change ☐ Addition ☐ Delete TITLE NAME SCHEU, BARBARA NAME STREET ADDRESS 298 BUTTONWOOD DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL **EVP** ☐ Delete TITLE Change ☐ Addition TITLE NAME SCHEU, CASEY NAME STREET ADDRESS 104 PT PLEASENT DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL 33037 **CFO** Delete TITLE ☐ Change ☐ Addition TITLE NAME SCHEU. NAME STREET ADDRESS STREET ADDRESS 104 PT PLEASENT DR. CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL 33037 ☐ Delete TITLE ☐ Change ☐ Addition 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 regeiver or Justes 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.