2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 10, 2001 8:00 am Secretary of State DOCUMENT # P95000009746 1. Entity Name BLACKDOG ADVERTISING & DESIGN, INC. 05-10-2001 90213 025 ***150.00 Mailing Address Principal Place of Business 8811 SW 132 ST. 8811 SW 132 ST. MIAMI FL 33176 MIAMI FL 33176 US US 3. Mailing Address 2. Principal Place of Business 8771 SW 129 TERRACE 8771 SW 129 TERLACE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0557325 Not Applicable MIAMI MIAMI Country \$8.75 Additional Zip Zip 5. Certificate of Status Desired Fee Required <u>33174</u> USA 331 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PENNEY, JOHN W Street Address (P.O. Box Number is Not Acceptable) 8811 SW 132 STREET **MIAMI FL 33176** Zip Code 33176 MIAMI 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE PENNEY, JOHN W NAME NAME 8811 SW 132 ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P MIAMI FL Change Addition ☐ Delete TITLE PENNEY, KATHRYN K NAME NAME 8811 SW 132 ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE □ Delete 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 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

KATHRYN K. PENNEY