2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 19, 2001 8:00 am Secretary of State DOCUMENT # **P95000070140** 1. Entity Name SGB INVESTMENTS. INC. 4-19-2001 90336 042 ***150.00 Principal Place of Business Mailing Address 1542 JUPITER COVE DRIVE 1542 JUPITER COVE DRIVE SUITE 507 SUITE 507 00039358 JUPITER FL 33469 JUPITER FL 33469 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0610523 Not Applicable Zip Country 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 FRADLEY, DONALD S Street Address (P.O. Box Number is Not Acceptable) 27 PENNOCK LANE, SUITE 104 JUPITER FL 33458 City Zip 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) TITLE ☐ Delete TITLE Change ☐ Addition BARNGROVER, GEORGE NAME NAME 1542 JUPITER COVE DR. #507 STREET ADDRESS STREET ADDRESS CITY-ST-7IP JUPITER FL CITY-ST-7tP ٧S TITLE ☐ Delete TITLE ☐ Change Addition BARNGROVER, SALLY NAME NAME 1542 JUPITER COVE DR. #507 STREET ADDRESS STREET ADDRESS CITY-ST-7IP JUPITER FL CITY-ST-ZIP TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITUE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DD 5 ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE F BARNE POUGL

☐ Delete

☐ Change

Addition