2000 UNIFORM BUSINESS REPORT (UBR)

Apr 27, 2000 8:00 am Secretary of State DOCUMENT # P96000070130 04-27-2000 90055 008 ***150.00 OCEANIA INVESTMENTS, INC. Mailing Address Principal Place of Business 3030 ROYAL GEORGE AVE. 13030 ROYAL GEORGE AVE. ODESSA FL 33556-5713 ^{20≜} FL 33556-5713 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3405438 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HYTHA, STEPHEN F Street Address (P.O. Box Number is Not Acceptable) 13030 ROYAL GEORGE AVE. ODESSA FL 33556 Zip Code City 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) DATE 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, 2000 Fee will be \$550.00 Tax filling 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 11. Change ☐ Addition TITLE TITLE ☐ Delete HYTHA, STEPHEN F NAME NAME STREET ADDRESS STREET ADDRESS 13030 ROYAL GEORGE AVE. CITY-ST-ZIP CITY-ST-ZIP ODESSA FL 33556 ☐ Change ☐ Addition VD ☐ Delete TITLE TITLE HYTHA, DAVID A NAME STREET ADDRESS STREET ADDRESS 5900 ACACIA CITY-ST-ZIP CITY-ST-ZIP **OAKLAND CA 94618** TITLE ☐ Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

TADURSTEPAEN F. HYTHA

813-926-8350

FILED