2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P97000090542 Apr 18, 2000 8:00 am Secretary of State GINGER GARNETT ENTERPRISES, INC. 04-18-2000 90191 038 ***150.00 Principal Place of Business Mailing Address 2709 MONTAGUE CT. E. 2709 MONTAGUE CT. E. **CLEARWATER FL 33761-1217** CLEARWATER FL 33761 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc Applied For ity & Stat 4. FEI Number 59-3479988 Not Applicable \$8.75, Additional 5. Certificate of Status Desired — Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GARNETT, VIRGINIA G Street Address (P.O. Box Number is Not Acceptable) 2709 MONTAGUE CT. E. CLEARWATER-FL 33761 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 IJIRGINIAG.GARNETI ent 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Delete TITLE TITLE GARNETT, VIRGINIA G NAME NAME 20 Pine St STREET ADDRESS STREET ADDRESS 2709 MONTAGUE CT. E. CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33761** ☐ Addition $o_{ extit{fle}}$ ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP · ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE 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 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.

VIRGINIA G. GARNETT 4/11/00