2003 FOR PROFIT CORPORATION

FILED UNIFORM BUSINESS REPORT (UBI Mar 17, 2003 8:00 am Secretary of State P98000079827 DOCUMENT # 1. Entity Name 03-17-2003 90473 012 ***158.75 TOLEDO HOLDINGS, INC. Principal Place of Business Mailing Address 8211 W. BROWARD BLVD., #350 8211 W. BROWARD BLVD., #350 PLANTATION FL 33324 PLANTATION FL 33324 ☐ CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For 65-1092914 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent **GUTTA, FRANK** 8211 W. BROWARD BLVD., #440 PLANTATION FL 33324 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. I am familiar with, and accept the obligation SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees ×10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition NAME **BLANKE, JOHN** NAME STREET ADDRESS 8211 W BROWARD BLVD #350 STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33324 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME SAMUELS, BRANDON NAME STREET ADDRESS 8211 W BROWARD BLVD #350 STREET ADDRESS CITY-ST-ZIE PLANTATION FL 33324 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change Addition NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this report or supplemental report is true and approach and that my signature is of the corporation or the receiver or trustee empowered to exclude this report as required by stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information account and that my signature shall have the same legal effect as if made under oath; that I am an officer or director excute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP