2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jan 24, 2002 8:00 am Secretary of State S01327 **DOCUMENT #** 1. Entity Name PENSACOLA INVESTMENTS, INC. Mailing Address Principal Place of Business 7900 MIAMI LAKES DRIVE WEST 7900 MIAMI LAKES DRIVE WEST OUGUL MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 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 65-0220464 Not Applicable \$8.75 Additional Ζiρ Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RODRIGUEZ, CHRISTY BRAFMAN, HOWARD J. Street Address (RALAMINUTAKES DRIVED WEST 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016 Zip Code City 33016 MTAMT LAKES 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) 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (9/01 Addition Delete TITLE TITLE BRAFMAN, HOWARD J. MAME NAME LUBOW, CHERYL 7900 MIAMI LKS DR. W. STREET ADORESS STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016 CITY-ST-ZIP C/TY-ST-ZIP MIAMI LAKES FL 33016 ☐ Change ☐ Delete TITLE DCP TITLE KISLAK, JAY I. NAME RODRIGUEZ, CHRISTY NAME STREET ADDRESS 7900 MIAMI LKS, DR. W. STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST CITY-ST-ZIP MIAMI LAKES FL 33016 CITY-ST-ZIP MIAMI LAKES FL. ☐ Addition ☐ Channe ☐ Delete TITLE TITLE NAME BARTELMO, THOMAS NAME STREET ADDRESS STREET ADDRESS 7900 MIAMI LAKES DR WEST CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL ☐ Addition Change ☐ Delete TITLE TILE NAME NAME STREET ADDRESS 300005307953: STREET ADDRESS City-St-7IP~ <u>-04/19/02--01035---027</u> CITY-ST-ZIP TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS 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.

FILED

305-364-4106