FILED 2000 UNIFORM BUSINESS REPORT (UBR) Mar 01, 2000 8:00 am Secretary of State DOCUMENT # P98000084151 PETZOLD NEW YORK, INC. 03-01-2000 90051 042 ***150.00 Principal Place of Business Mailing Address 1410 W 24TH ST 1410 W 24TH ST MIAMI BEACH FL 33140-4523 MIAMI BEACH FL 33140 C0028259 2. Principal Place of Business Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0866953 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent B & C CORPORATE SERVICES, INC. 201 S BISCAYNE BLVD, STE 3000 **MIAMI FL 33131** 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 DATE (NOTE: Registered Agent signature required when reinstating) 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 M/NY 1, 2000 Fee will be \$550.00 Tax filing 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 12. 11. ☐ Addition Change Delete TITLE TITLE PETZOLD, ULRICH NAME 1410 W 24TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33140 TITLE Change Addition ☐ De'ete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP rith this filing does not qualify to true and accurate and that powered to execute this repo on stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is shall have the same legal effect as if made under oath; that I am an officer or director by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the exemp 13. I hereby certify that the information supplied with signatu indicated on this report or supplemental report of the corporation or the receiver or trust to changed, or on an attachment with an and

with all other

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

SIGNATURE:

CR2E034 (9/99)