2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P96000 56652 JEURETARY OF STATE Olivenhain Estates, Inc. JIVISION OF CORPORATIONS 00 MAY -8 PM 3: 16 Principal Place of Business Mailing Address 601-4 Whitney Ave 102 N. Swinton Ave Lantana, FL. 33462 Suite: 301 Deiray Beach FL 33444 2. Principal Place of Business 3. Mailing Address P.O. Box 7538 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 65-0690740 Not Applicable Zip Country \$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 Street Address (P.O. Box Number is Not Acceptable) Robert M Schwartz 102 N. Swinton tue Delray Beach FL 33444 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 DATE Signature, typed or printed name of registered agent and title if applicable (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 After MAY 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 11. President TITLE TITLE ☐ Delete Paul S. Pariser NAME NAME Box 7538 STREET ADDRESS STREET ADDRESS Delray Beach FL 33482 CITY-ST-ZIP CITY-ST-ZIP v.P. + Secretory Change Change ☐ Addition ☐ Delete TITLE TITLE were S. Reid NAME NAME Box 7538 STREET ADDRESS STREET ADDRESS Delray Beach, FL 33482 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE TITLE NAME -05/25/00---01038---035 STREET ADDRESS STREET ADDRESS \*\*\*\*317.50 City-ST-7iP \*\*\*\*317.50 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP Delete TITLE 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.

## OLIVENHAIN ESTATES, INC. P.O. BOX 7538 DELRAY BEACH, FLORIDA 33482-7538 TEL: (561)-637-4501 FAX:(561)-637-4502

March 23, 2000

Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: 2000 Uniform Business Report OLIVENHAIN ESTATES, INC.

RE: Letter #300A00022891

Enclosed is check in the amount of \$317.50 to cover the cost of filing the 1999 and 2000 Annual Report and the cost of a Certificate of Status for both years.

We did not file the 1999 Annual Report as we did not receive it because of a change in address. We were advised that because the 1999 Report was returned to your office we would just have to pay the regular fee plus the cost of a Certificate of Status.

Sincerely,

Lucie S. Reid

LSR/ss

Encl.