I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made u

under eiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears er or director of the corporati above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: MOSI COLLINS

FEI Number: 85-3823430

Name and Address of Current Registered Agent:

COLLINS, MOSI N 2000 E 12TH AVE UNIT 5702 TAMPA, FL 33675 US

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 Electronic Signature of Registered Agent **Officer/Director Detail :** Title Р Title VP COLLINS, MOSI N ROSARIO, MIDNA Name Name 2000 E 12TH AVE UNIT 5702 309 WEST MARTIN LUTHER KING, Address Address BLVD City-State-Zip: TAMPA FL 33675 TAMPA FL 33603 City-State-Zip:

Current Principal Place of Business:

401 W MARTIN LUTHER KING BLVD TAMPA, FL 33603

Entity Name: URBAN JUICES INC

Current Mailing Address:

2000 E 12TH AVE **UNIT 5702** TAMPA, FL 33675

SIGNATURE: MOSI COLLINS

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P2000006365

Certificate of Status Desired: No

04/30/2023

Electronic Signature of Signing Officer/Director Detail

FILED Apr 30, 2023 Secretary of State 2942699957CC