## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 178883 May 01, 2000 8:00 am Secretary of State 1. Entity Name ROGER WILLIAMS ENTERPRISES, INC. 05-01-2000 90420 030 \*\*\*150.00 Principal Place of Business Mailing Address 4875 N W 31ST AVENUE 4875 N W 31ST AVENUE MIAMI FL 33142-3465 MIAMI FL 33142 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-0965764 Not Applicable Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILLIAMS, ERNESTINE Street Address (P.O. Box Number is Not Acceptable) 4875 NW 31ST AVE **MIAMI FL 33142** 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. SIGNATURE 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 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Addition TITLE ☐ Delete WILLIAMS, ERNESTINE NAME NAME STREET ADDRESS STREET ADDRESS 4875 NW 31ST AVE CITY-ST-ZIP CITY-ST-7IP MIAMI FL ☐ Addition TITLE Change Delete TITLE ASHE, WILLARENA NAME STREET ADDRESS 4875 N W 31ST AVENUE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI, FL 00000 ~ [ Change ☐ Addition -- Delete TITLE WILLIAMS, ROJEAN NAME NAME STREET ADDRESS 4875 N W 31ST AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 ☐ Addition TITLE Change TITLE ☐ Delete WILLIAMS, RONICE NAME NAME STREET ADDRESS STREET ADDRESS 4875 SW 31 AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Delete TITLE ☐ Change Addition TITLE HOWELL, ALTHEA NAME NAME STREET ADDRESS STREET ADDRESS 4875 N W 31ST AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

SIGNATURE:

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