2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED DOCUMENT # 213834 Mar 20, 2000 8:00 am **Secretary of State** PERSHING INDUSTRIES INC. 03-20-2000 90021 026 ***150.00 Principal Place of Business Mailing Address 1424 NW LEJEUNE RD 1424 NW LEJEUNE RD MIAMI FL 33126 MIAMI FL 33126 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-0843901 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REVITZ, JANICE Street Address (P.O. Box Number is Not Acceptable) 1424 NW LEJEUNE RD **MIAMI FL 33126** City Zip Code Fi 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change Addition TITLE ☐ Delete TITLE. NAME NAME KLEIN. LES STREET ADDRESS STREET ADDRESS 1424 N W LÉJEUNE RD CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 Addition ☐ Change ☐ Defete TITLE TITLE REVITZ, MARK STREET ADDRESS STREET ADDRESS 1424 N W LEJEUNE RD CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI, FL 00000</u> ☐ Change Addition TITLE ☐ Delete TITLE NAME MAXWELL, ROBERT STREET ADDRESS STREET ADDRESS 1424 N W LEJEUNE RD CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 ☐ Change Addition TITLE ☐ Delete TITLE NAME REVITZ, MAURICE NAME STREET ADDRESS STREET ADDRESS 1424 N W LEJEUNE RD CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME ADAMS, BRIAN C STREET ADDRESS STREET ADDRESS 1424 N.W. LEJEUNE RD CITY-ST-ZIP CITY-ST-7IP MIAMI_FL ☐ Change Addition Delete TITLE D TITLE NAME NAME REVITZ, JANICE STREET ADDRESS STREET ADDRESS 1424 NW LEJEENE RD CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33126 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