2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 26, 2001 8:00 am **DOCUMENT # 213881 Secretary of State** MEDLEY ENTERPRISES INC 01-26-2001 90147 017 ***150.00 Principal Place of Business Mailing Address 9401 NW 106TH ST 9401 NW 106TH ST STE 101 STE 101 MEDLEY FL 33178 MEDLEY FL 33178 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0871186 Not Applicable Zip Country Zip 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 Name ROBINSON JR, BARNETT ESQ Street Address (P.O. Box Number is Not Acceptable) 2255 GLADES ROAD STE. 319-A **BOCA RATON FL 33431** City Zip Code 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 ☐ Delete Change Addition TITLE LARGAY, CHARLES E NAME 9401 NW 106TH ST, STE 101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MEDLEY FL CITY-ST-ZIP Addition ☐ Delete LARGAY, CHARLES E, JR NAME 9401 NW 106TH ST, STE 101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MEDLEY FL CITY-ST-ZIP TD ☐ Delete ☐ Addition TITLE TITLE ☐ Change LARGAY, HARRY W NAME 9401 NW 106TH ST, STE 101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MEDLEY FL CITY-ST-ZIP ☐ Delete Addition TITLE KNOWLES, JANET NAME NAME 9401 NW 106TH ST. STE 101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MEDLEY FL ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

January 10, 2001

305-885-2458

Daytime Phone #