2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 331295 Apr 13, 2000 8:00 am Secretary of State 1. Entity Name ENGAN, INC. 04-13-2000 90058 014 ***150.00 Mailing Address Principal Place of Business 1960 SW 74TH AVE. 1960 SW 74TH AVE. PLANTATION FL 33317-4933 PLANTATION FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-1303331 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NADEAU, GEORGE A. Street Address (P.O. Box Number is Not Acceptable) 1960 SW 74TH AVENUE PLANTATION FL 33317 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, typed or printed name of registered agent and title it applicable DATE (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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITLE Delete TITLE NAME NADEAU, CAMILLE A. NAME STREET ADDRESS STREET ADDRESS 1960 SW 74TH AVENUE CITY-ST-ZIP CITY-ST-7IP PLANTATION FL 33317 Change 📈 ☐ Addition Delete TITLE TITLE NADEAU, GEORGE A. NAME NAME NADEAU, GEROGE A STREET ADDRESS STREET ADDRESS 1960 SW 74TH AVENUE CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33317 Change ☐ Addition - - Delete TITLE TITLE -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete 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 ampowered 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 artists, with all other like empowered.

SIGNATURE:

A. NADEAU) 09/09/00/95 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR