FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jan 10, 2001 8:00 am Secretary of State **DOCUMENT # 331295** 1. Entity Name ENGAN, INC. 01-10-2001 90008 025 ***150.00 Principal Place of Business Mailing Address 1960 SW 74TH AVE. IGEN SW 74TH AVE PLANTATION FL 33317 PLANTATION FL 33317 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1303331 → Not Applicable Country \$8.75 Additional Zip 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 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 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, 2001 Fee will be \$550.00 Tax filling requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (10/00) ☐ Change ☐ Addition TITLE ☐ Delete NADEAU, CAMILLE A. NAME NAME STREET ADDRESS 1960 SW 74TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33317 ☐ Addition ☐ Change TITLE ☐ Delete NADEAU, GEORGE A NAME NAME STREET ADDRESS 1960 SW 74TH AVENUE STREET ADDRESS 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 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CITY-ST-ZIP Change ☐ Addition ☐ Delete 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 13. I hereby certify that the information supplied with this filling 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:

 $\equiv \mathbb{H}^{\frac{1}{2}}$

=...:

≡::::

=:::