FILED 2002 UNIFORM BUSINESS REPORT (UBR) Feb 05, 2002 8:00 am Secretary of State DOCUMENT # 354202 1. Entity Name 02-05-2002 90091 030 ***150.00 BILL DAILEY BONDING AGENCY, INC. Principal Place of Business Mailing Address 2632 HOLLYWOOD BOULEVARD 2632 HOLLYWOOD BOULEVARD HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address 4921 Fillmore Street 4921 Fillmore Street Suite, Apt. #, etc. . DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number 59-1276763 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired USA USN Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DAILEY, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 2632 HOLLYWOOD BLVD HOLLYWOOD FL 33020 Zip Code City FL 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, 2002 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 OFFICERS AND DIRECTORS 12. 11. X Change ☐ Addition ☐ Delete TITLE TITLE pailey, William 4921 Fillmore Street NAME Dailey, William NAME 2632 HOLLYWOOD BLVD STREET ADDRESS STREET ADDRESS FI 33021 HOLLYWOOD FL CITY-ST-ZIP CITY-ST-ZIP Hollywad ☐ Delete TITLE Change ☐ Addition ST TITLE păiley, Suzonne S DAILEY, SUZANNE S NAME NAME 4921 Fillmore Street STREET ADDRESS 2632 HOLLYWOOD BLVD STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP HOLLYWOOD FL TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 eath; 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

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Change

Addition

CR2E034 (9/01)