2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 372742 Feb 18, 2000 8:00 am **Secretary of State** CONVENTION RESOURCES DIRECTORY CORP. 02-18-2000 90031 001 ***450.00 Mailing Address Principal Place of Business 5979 NW 151ST STREET., #120 5979 NW 151ST STREET.. #120 MIAMI LAKES FL 33014 MIAMI LAKES FL 33014-2448 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1368142 Not Applicable Zip Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HERMAN, HAL Street Address (P.O. Box Number is Not Acceptable) 5979 NW 151ST STREET., #120 MIAMI LAKES FL 33014 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 Signature, typed or printed name of registered agent and title if applicable (NQTE: 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE Delete TITLE NAME HERMAN, HAL STREET ADDRESS STREET ADDRESS 5979 NW 151ST STREET., #120 CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL 33014 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME HERMAN, LAUREL NAME STREET ADDRESS STREET ADDRESS 5979 NW 151ST STREET., #120 CITY-ST-7IP CITY-ST-ZIP MIAMI LAKES FL 33014 ☐ Addition ☐ Change ☐ Delete TITLE TITLE ELLIS, GERALDINE NAME NAME STREET ADDRESS STREET ADDRESS 5979 NW 151ST STREET., #120 CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL 33014 Change ☐ Addition □ Detete TITLE HERMAN, GARY NAME NAME STREET ADDRESS STREET ADDRESS 5979 NW 151ST STREET., #120 CITY-ST-7IP CITY-ST-ZIP MIAMI LAKES FL 33014 Change TITI F ☐ Delete TITLE ☐ Addition 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 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.

FILED