## FILED 2000 UNIFORM BUSINESS REPORT (UBR) Jul 24, 2000 8:00 am DOCUMENT# みの/088 **Secrétary of State** 1. Entity Name 07-24-2000 90007 007 \*\*\*158.75 - BAZFAJE, INC EDWARD RODRIGUEZ AND CO. INC. Principal Place of Business Mailing Address STOS WITHAMMA AUE STORING HANKAT AVEC TAMPAIFL 336341698 TAMPAJIFL 53634 A0068675 2. Principal Place of Business 3. Mailing Address STOR W. HANNA 5708 W. HANNA AVC Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-6059943 TAMPA, FL TAMPA, FL Not Applicable Country \$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 RODILGUEZ MICHAEL RODRIGUEZ, MICHAEL E. Street Address (P.O. Box Number is Not Acceptable) 5708 WOFSTCHANNAFAVE #AMPAINFL = 33634 10 5708 W. HANNA TAMPA 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 (NOTE: Registered Agent signature required when reinstating) DATE ered 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. (66/6)Change Addition ☐ Delete TITI F TITLE NAME RODRIGUEZ MICHAEL E ROORIGUEZ, MICHAEL E. NAME 1556 PATRICIA 1556 PATTUCIA AUC STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DUNCOIN FL 34698 DUNEDIN VTO ☐ Delete TITLE RODRIGUEZ JOSEPH E NAME NAME RODUWEZ JOSEPH E 17122 LONGACRE LN STREET ADDRESS STREET ADDRESS 17122 LONGACRE LN CITY-ST-7IP CITY-ST-ZIP ODESSA FL 33552 ODESSA FL 33556 Change Addition TITLE TITLE ☐ Delete MORO OLGA C. NAME MELO OLGA C. 3521 SNOWY EGRET STREET ADDRESS STREET ADDRESS 3521 SNOWY EGKET CITY-ST-ZIP PALM HARBOR FL CITY-ST-ZIP PALM HARBOR FL Change Addition VD ☐ Defete TITLE RODRIDICZ EDWARD M. Rodribuez Edward M. NAME STREET ADDRESS 5708 W HANNA AUC STREET ADDRESS 5708 W. HANNA AUC CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33634 TAMPA FL 33634 Change Addition Delete TITLE BELTRON, MANUEL MANUCL BOLTKAN NAME 10707 OUT ISLAND DR 10707 OUT ISLAND DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL *3*35(5 TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE 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 appears, with all other like empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034