2002 UNIFORM BUSINESS REPORT (UBR)

Feb 17, 2002 8:00 am DOCUMENT # 489034 **Secretary of State** 1. Entity Name 02-17-2002 90039 030 ***150 00 BIRD DOUGLAS SERVICE STATION, INC. Principal Place of Business Mailing Address 3010 SW 37TH AVE 3010 SW 37TH AVE MIAMI FL 33133 MIAMI FL 33133 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1630865 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PHILLIPS, ELAINE Street Address (P.O. Box Number is Not Acceptable) 3010 S.W.37TH AVENUE MIAMI FL 33133 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 if 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, 2002 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. 12. PSTD CR2E034 (9/01) ☐ Delete TITLE Change Addition TITLE STD PHILLIPS, ELAINE NAME NAME 3010 S.W. 37 AVE. STREET ADDRESS STREET ADDRESS MIAMI FL 33133 CITY-ST-ZIF CITY-ST-ZIP X Delete TITLE TITLE ☐ Change Addition PHILLIPS, RICHARD NAME NAME 3010 SW 37 AVE STREET ADDRESS STREET ADDRESS MIAM! FL 33133 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE PHILIPPOU, ANDREW NAME NAME 3010 SW 37 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33133** CITY-ST-ZIP PD ☐ Delete Change Addition TITLE TITLE PHILLIPS, STEVE NAME NAME 3010 SW 37TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33133** CITY-ST-ZIP TITI E Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

changed, or on an attachment with an address

Daytime Phone #