2000 UNIFORM BUSINESS REPORT (UBR) Apr 24, 2000 8:00 am Secretary of State **DOCUMENT # 493845** AIDE SERVICES, INC. 04-24-2000 90121 039 ***150 00 Principal Place of Business Mailing Address 5402 BEAUMONT CENTER BLVD. STE 102 5402 BEAUMONT CENTER BLVD. STE 102 TAMPA FL 33634-2292 TAMPA FL 33634-5202 00037030 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 36-2862257 Not Applicable Zip 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 HEUER. MARTIN Street Address (P.O. Box Number is Not Acceptable) 5402 BEAUMONT CENTER BLVD, STE 102 TAMPA FL 33634-2292 City 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS TITLE TITI F ☐ Change * Addition ☐ Delete Vice President NAME HEUER, MARTIN NAME Edwards, Judith P. STREET ADDRESS 5402 BEAUMONT CENTER BLVD. #102 STREET ADDRESS 5402 Beaumont Center Blvd. #102 CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 00000 Tampa, FL 33634 TITLE ☐ Defete TITLE ☐ Change * Addition Vice President VAN VORIS, JOHN I NAME NAME Dunlap, Edward STREET ADDRESS **501 EAST KENNEDY BLVD** STREET ADDRESS 5402 Beaumont Center Blvd. #102 CITY-ST-ZIP TAMPA FL City-ST-7IP Tampa, FL 33634 VSD TITLE Addition ☐ Delete Change HEUER, RITA M NAME STREET ADDRESS 5402 BEAUMONT CENTER BLVD. #102 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 00000 TITLE ☐ Delete ☐ Change Addition HEUER, MARTIN J NAME NAME 5402 BEAUMONT CENTER BLVD. #102 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Delete ☐ Change □ Addition TITLE NAME HEUER, RONALD J. NAME STREET ADDRESS 5402 BEAUMONT CENTER BLVD. #102 STREET ADDRESS CITY-ST-ZIP TAMPA FL 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

SCHUETT, VICTORIA M

TAMPA FL

5402 BEAUMONT CENTER BLVD. #102

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Change

Addition