2002 UNIFORM BUSINESS REPORT (UBR)

Sep 16, 2002 8:00 am Secretary of State DOCUMENT # 557883 1. Entity Name 09-16-2002 90110 038 ***150.00 BOB POPPINO, INC. Principal Place of Business Mailing Address P.O. BOX 832794 P.O. BOX 832794 MIAMI FL 33283 MIAMI FL 33283 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1791784 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JONES, A M Street Address (P.O. Box Number is Not Acceptable) 3421 N POWERLINE RD POMPANO BEACH FL 33069 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D Delete TITLE ☐ Addition POPPINO, ROBERT D NAME NAME 211 ROCKLEDGE RD STREET ADDRESS 9018 St. Pierre Ln. STREET ADDRESS SPRUCE PINE NC 28777 CITY-ST-ZIP CITY-ST-ZIP Charlotte, NC. 28277 CS TITLE ☐ Delete TITLE ☐ Change ☐ Addition POPPINO. PHYLLIS C NAME NAME STREET ADDRESS 211 ROCKLEDGE RD STREET ADDRESS 9018 St. Pierre Ln. CITY-ST-ZIP SPRUCE PINE NC 28777 CITY-ST-ZIP Charlotte, NC. 28277 ☐ Defete TITLE ☐ Addition ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 frustee propowered 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 add

CITY-ST-ZIP

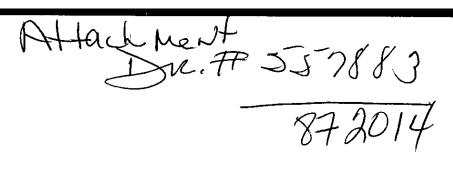
SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPE

FILED





P.O. Box 832794 Miami, Florida 33183 Tel./Fax 305/274-9315

September 13, 2002

Divisions of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, F1 32302-1500

Subj: - 2002 UBR-

The corporation did not receive prior notice.

BOB POPPINO, Inc.

Robert D. Poppino

Dade CC # 0011951

President