2001 UNIFORM BUSINESS REPORT (UBR)

Apr 06, 2001 8:00 am Secretary of State DOCUMENT # 573190 1. Entity Name DAINTY INVESTMENTS CORPORATION 04-06-2001 90014 024 ***150.00 Principal Place of Business Mailing Address % JOSIAS & GOREN. P.A. % JOSIAS & GOREN, P.A. 3099 E. COMMERCIAL BLVD #200 3099 E. COMMERCIAL BLVD #200 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1878826 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GOREN, SAMUEL S. Street Address (P.O. Box Number is Not Acceptable) 3099 E. COMMERCIAL BLVD #200 FT. LAUDERDALE FL 33308 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 DATE Signature, typed or printed name of registered agent and title if applicable. (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 After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. **PST** ☐ Addition Change ☐ Celete TITLE TITLE GREEN, HAROLD NAME NAME 2201 NW 30TH PL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BCH FL CITY-ST-ZIP Change ☐ Addition TITLE Oelete TITLE GREEN, HAROLD NAME NAME 2201 NW 30TH PL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BCH FL CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITI F 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-7/P CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Harold Green Director SIGNATURE AND TYPETOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 12, 2001 416-486-4270

Date Daytime Phone #