2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # 594828 Mar 22, 2000 8:00 am Secretary of State SMALL ENGINE SERVICE OF 03-22-2000 90032 027 ***150.00 DAYIE INC. 030 S. DIYIE HWY OCA RATON, FL 33432 2. Principal Place of Business 3. Mailing Address C0042124 SAME SAME Suite, Apt #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FÉI Number Applied For 59-181791 Not Applicable 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 YIRGINIA J. BENOIT-GAYIND Street Address (P.O. Box Number is Not Acceptable) 4570 NW 5 AYENUE OCA PATON, FR 334341 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 YIRGINIA J. BENOIT-GAYINO ed agent and title if applica s 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. UGO GAYIND ☐ Delete Addition TITLE 4570 NW SAYE NAME NAME STREET ADDRESS BOCA RATON FL 3343/ STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP YIRGINIA J. BENOITEMBAY Addition ☐ Change TITLE ₹#*6*0 NAME 4570 NWS AYE STREET ADDRESS STREET ADDRESS BOCA RATON FL 33431 CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete 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 of 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.