2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 07, 2000 8:00 am Secretary of State **DOCUMENT # 618724** 1. Entity Name DISTRIBUTORS LEASING CORP. 04-07-2000 90064 009 ***150.00 Principal Place of Business Mailing Address 1255 N.E. FLAGLER DR. 1255 N.E. FLAGLER DR. FT LAUDERDALE FL 33304-2131 FT LAUDERDALE FL 33304-2131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1909901 Not Applicable Country Zip 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 THIES, WILLIAM F JR Street Address (P.O. Box Number is Not Acceptable) 1335 NE 26 ST FT LAUDERDALE FL 33305 Zip Code City FL 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, 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. TITLE ☐ Delete TITLE Addition THIES, WILLIAM F. NAME STREET ADDRESS STREET ADDRESS 1335 NE 26TH ST CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete Change ☐ Addition TITLE TITLE THIES, DENNIS W NAME NAME 1335 NE 26TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Change ☐ Addition Delete TITLE TITLE THIES JR., WILLIAM F. NAME NAME STREET ADDRESS 1335 N E 26TH STREET STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT LAUDERDALE, FL 00000 Addition ☐ Delete Change TITLE TITLE MILLS, BRUCE E. NAME NAME STREET ADDRESS 1335 NE 26TH ST STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME BOWNE, ROBERTA A. STREET ADDRESS STREET ADDRESS 1335 NE 26TH ST

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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Delete

SIGNATURE:

ft. Lauderdale fl

CITY-\$T-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roberta A. Bowne 3/20/00

954-566-1000x200

Daytime Phone #

☐ Change

☐ Addition