2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

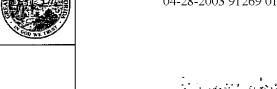
665213 **DOCUMENT #**

1. Entity Name DESTINATIONS EVERYWHERE, INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91269 018 ***158.75



Mailing Address Principal Place of Business 32 FIRST STREET SOUTH 32 FIRST STREET SOUTH ST PETERSBURG FL 33701 ST PETERSBURG FL 33701 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For City & State City & State 59-1983166 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TOLTON, WILLIAM J III Street Address (P.O. Box Number is Not Acceptable) 32 FIRST STREET SOUTH ST PETERSBURG FL 33701 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PSD Change ☐ Addition TITLE ☐ Delete TITLE TOLTON, WILLIAM J NAME NAME 32 FIRST STREET SOUTH STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33701 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE WILLIAMS, JORY D NAME NAME 32 FIRST STREET SOUTH STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33701 CITY-ST-ZIP CITY-ST-7IP Change TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Jere Toiton, II 4/25/03 (927)823-0097