2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 694312 May 15, 2000 8:00 am Secretary of State ALVAREZ PRINTING CO., INC. 05-15-2000 90218 020 ***150.00 Principal Place of Business Mailing Address C/O SUSANA A. HART C/O SUSANA A. HART 6536 123RD AVE N 6536 123RD AVE N LARGO FL 33773-3609 LARGO FL 34643 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2137793 Not Applicable Country \$8.75 Additional Country Certificate of Status Desired 33773 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HART, SUSANA A Street Address (P.O. Box Number is Not Acceptable) 6536 123RD AVE N **LARGO FL 34643** 33773 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 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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. Addition ☐ Delete TITLE TITLE JOSE L. ALVAREZ ALVAREZ, JOSE L NAME NAME 6930 13 AVE. N. STREET ADDRESS STREET ADDRESS 6930 13TH AVE N CITY-ST-ZIP ST PETERSBURG FL CITY-ST-ZIP ST PETERSBURG. Change ☐ Addition **5/T/D** ☐ Delete TITLE DULCE M. ALVAREZ NAME ALVAREZ, DULCE M NAME 6930 13 AYE. N. STREET ADDRESS STREET ADDRESS 6930 13TH AVE N ST PETERS BURG, FL. CITY-ST-ZIP CITY-ST-ZIP ST_PETERSBURG FL Change ☐ Addition STD ☐ Delete TITLE T/T/ F SUSANA A. HART NAME HART, SUSANA A NAME 13864 106 AVE. N. STREET ADDRESS 13864 106TH AVE N STREET ADDRESS SEMINOLE. FL CITY-ST-ZIP SEMINOLE, FL 00000 CITY-ST-ZIP Change Addition 💢 Delete TITLE TITLE ALVAREZ, JOSE I. NAME STREET ADDRESS STREET ADDRESS 6820 PARK STREET #1 CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

GNATURE: Sura O Cont 503 ANA A. HART 4-28-00 727 531-6331