2002 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2002 8:00 am § Secretary of State DOCUMENT # 856831 1. Entity Name BRASWELL: SERVICES: GROUP: INC. 4-22-2002 90102 014 ***150 15 Principal Place of Business Mailing Address 2007 CHERRY HILL LANE P O BOX 72529 CHARLESTON SC 29405 **CHARLESTON SC 29415** 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 57-0549112 Not Applicable Zip 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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. 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 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 TITLE PCD 🍪 🧓 ☐ Delete TITLE ☐ Change ☐ Addition BRASWELL, ELLIOTT, S. & NAME NAME STREET ADDRESS 2007 CHERRY HILL LANE STREET ADDRESS CITY-ST-ZIP CHARLESTON SC 29405 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME REYNOLD, JENNIFER B. NAME STREET ADDRESS 2007 CHERRY HILL LANE STREET ADDRESS CITY-ST-ZIP **CHARLESTON SC 29405** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME BRASWELL, JAMES E. NAME 2007 CHERRY HILL LANE STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP **CHARLESTON SC 29405** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition Braswell, elliott s. j NAME STREET ADDRESS 2007 CHERRY HILL LSNE STREET ADDRESS CHARLESTON SC 29405 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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

changed, or on an attachment with an address, with all other like empowered. NING OFFICER OR DIRECTOR Davime Phone #

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