2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an add

SIGNATUR

SIGNATURE:

FILED May 05, 2002 8:00 am Secretary of State **DOCUMENT #** F01000004927 1. Entity Name MJR INTERNATIONAL SALES, INC. 05-05-2002 90079 011 ***150.00 Principal Place of Business Mailing Address 2380 INTERNATIONAL STREET 2380 INTERNATIONAL STREET **COLUMBUS OH 43228** COLUMBUS OH 43228 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 31-1434419 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent BRADSHAW, JEFFREY Street Address (P.O. Box Number is Not Acceptable) 351 UNIVERSITY PARK DRIVE WINTER PARK FL 32792 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME BRADSHAW, JEFFREY NAME STREET ADDRESS 2380 INTERNATIONAL STREET STREET ADDRESS CITY-ST-ZIP COLUMBUS OH CITY-ST-ZIP DILE ☐ Delete TITLE ☐ Change ☐ Addition NAME LAUFERSUEILER, MARK NAME STREET ADDRESS 2380 INTERNATIONAL STREET STREET ADDRESS CITY-ST-ZIP COLUMBUS OH CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST 7IE CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Daytime Phone #