2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jan 23, 2003 8:00 am Secretary of State F88139 DOCUMENT # 01-23-2003 90110 021 ***150.00 1. Entity Name RICHARD A. BARNETT, P.A. Principal Place of Business Mailing Address 121 S. 61ST TERRACE 121 S. 61ST TERRACE STE. #A STF. #A HOLLYWOOD FL 33023 HOLLYWOOD FL 33023 2. Principal Place of Business 3. Mailing Address 1318 Buchanan 94 80.223248 ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 59-2210977 Hollyword Not Applicable Country \$8.75 Additional ÜSA 5. Certificate of Status Desired U. 5 1 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARNETT, RICHARD A Street Address (P.O. Box Number is Not Acceptable) 121 S. 61ST TERRACE STE. #A HOLLYWOOD FL 33023 Zip Code City 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. -18-03 SIGNATURE (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. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition CR2E034 (10/02) TITLE Delete TITLE BARNETT, RICHARD A NAME NAME 1318 BUCHANAN ST. STREET ADDRESS STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ 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 Addition ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME

FILED

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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP