2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 07, 2001 8:00 am Secretary of State DOCUMENT # **F96392** SOUP TO NUTS, INC. 02-07-2001 90150 027 ***150.00 Principal Place of Business Mailing Address 3201 CARDINAL DR 3201 CARDINAL DR VERO BEH FL 32963 VERO BCH FL 32963 LIUUAU 3. Mailing Address 2. Principal Place of Business 3125 OCEAN DRIVE 7267 61ST ST Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2211789 VERO BEACH VERO BEACH, FL Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 32963 32967 US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARX, JOHN P. Street Address (P.O. Box Number is Not Acceptable) 7267 6157 ST MARX, JOHN P. 3201 Cardinal dr vero **be**ach fl 32963 VERO BEACH 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. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE P MARX, JOHN P NAME NAME 3201 CARDINAL DR 7267 6157 57 MARX, JOHN P STREET ADDRESS STREET ADDRESS 7267 61st Street Vero Beach, FL 32967 CITY-ST-ZIP VERO BEACH FL 32967 CITY-ST-ZIP TITLE Delete ☐ 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 ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 changed, or on an attachment with an address, with all other like empowered.

PE P. May JOHN P. MARX

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: