2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 03, 2000 8:00 am Secretary of State DOCUMENT # F98000001844 EUROPEAN MICRO HOLDINGS, INC. 02-03-2000 90005 029 ***150.00 Principal Place of Business Mailing Address 6073 NW 167 STREET, UNIT C-25 6073 NW 167 STREET, UNIT C-25 MIAMI FL 33015-4390 MIAMI FL 33015 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEi Number 65-0803752 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PARKER, CLAYTON E Street Address (P.O. Box Number is Not Acceptable) 201 S BISCAYNE BLVD., 20TH FL MIAMI FL 33131 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 DATE 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Change ■ Addition PD TITLE TITLE ☐ Delete NAME NAME SHIELDS, HARRY D STREET ADDRESS 808 THIRD AVENUE SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN ☐ Addition ☐ Change TITLE ☐ Delete TITLE GALLAGHER, JOHN B NAME NAME STREET ADDRESS STREET ADDRESS 6073 NW 167 STREET UNIT C-25 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition TITLE ☐ Delete NAME NASH, JAY STREET ADDRESS STREET ADDRESS 808 THIRD AVENUE SOUTH CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN ☐ Change Addition TITLE Delete TITLE NAME SUTTON, BARRETT STREET ADDRESS STREET ADDRESS 414 UNION STREET CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN ☐ Delete TITLE Change Addition TITLE NAME SAXON, KYLE R NAME STREET ADDRESS STREET ADDRESS 169 EAST FLAGLER CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change Addition Delete TITLE TITLE

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

GILBERT, LAURENCE

20-24 CHURCH STREET

NAME

STREET ADDRESS

CITY-ST-7/P

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR