2001 UNIFORM BUSINESS REPORT (UBR)

Apr 19, 2001 8:00 am Secretary of State DOCUMENT # F98000003043 TREND DISTRIBUTORS INC. 04-19-2001 90017 049 ***150.00 Principal Place of Business Mailing Address 2800 SW 42 ST 2800 SW 42 ST TOOFFE FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0835771 Not Applicable 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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. **SIGNATURE** 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, 2001 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 12. CR2E034 (10/00) TITLE Change NAME NAME WURTH, REINHOLD STREET ADDRESS STREET ADDRESS REINHOLD WURTH STR. 12-16, 74653 KUNZELSAU CITY-ST-ZIP CITY-ST-ZIP GAISBACH, GERMANY Change ☐ Addition TITLE TITLE JAEGER, WALTER DR. NAME NAME STREET ADDRESS STREET ADDRESS REINHOLD WURTH STR. 12-16, 74653 KUNZELSAU CITY-ST-7IP CITY-ST-7IP GAISBACH, GERMANY ☐ Change Addition TITLE TITLE. NAME HINDS, DAVID H NAME STREET ADDRESS STREET ADDRESS 2800 SW 42 ST CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33312 TITLE ☐ Change ☐ Addition TITLE ☐ Delete LANGE, CHRISTOPH NAME NAME STREET ADDRESS 2800 SW 42 ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33312 Delete Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

SIGNATURE:

an address, with all other like empowered.

4-10-01

954-321-7220

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