FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attack

Jul 18, 2001 8:00 am F99000006060 DOCUMENT # **Secretary of State** 1. Entity Name 07-18-2001 90004 026 ***550.00 NAVELLIER & ASSOCIATES, INC. Principal Place of Business Mailing Address 1 EAST LIBERTY. 3RD FLOOR 1 EAST LIBERTY. 3RD FLOOR **RENO NV 89501 RENO NV 89501** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 88-0240393 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name __VALDES:FAULI:CORPORATE:SERVICES,:INC..... Street Address (P.O. Box Number is Not Acceptable) 777 SOUTH FLAGLER DR., SUITE 500 EAST WEST PALM BEACH FL 33401 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. 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 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE PD NAVELLIER, LOUIS G. NAME NAME NAVELLIER, LOUIS G 3ROFIR STREET ADDRESS STREET ADDRESS 1286 HIDDEN WOODS CITY-ST-ZIP CITY-ST-ZIP ZEPHYR GOVE NV 89448 Change **Addition** ☐ Delete TITLE ARTEN KUYPER NAME E. LIBERTY BRO FUR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP REND CITY-ST-ZIP Change Addition ☐ Delete TITLE DENNIS PRICE NAME BAD FIR E. LIBERTY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP P.ENO Change Addition ☐ Delete TITI F TITLE NAME NAME KEITH BASSO 3RD FLR STREET ADDRESS I E. LIBERTY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RENO ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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