2000 UNIFORM BUSINESS REPORT (UBR) FILED May 07, 2000 8:00 am Secretary of State **DOCUMENT # G06545** 1. Entity Name DAYTONA BEACH REAL ESTATE CENTER, INC. 05-07-2000 90007 022 ***150.00 Principal Place of Business Mailing Address 2922 RIVER POINT DR. RIVER POINT OR. DAYTONA BEACH SHORES FL 32118-5915 BEACH SHORES FL 32118 B0084858 3. Mailing Address Hantre DO NOT WRITE IN THIS SPACE vreu11 Applied For 4. FEI Number 59-2242670 Shoves Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired u SA Fee Required Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JIGITA RAMANAUSKAS, SIGITA 2922 RIVER POINT DR. DAYTONA BCH. SHORES FL 32118 8. The above named antity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. SIGNATURE e of registered agent and title if applicable 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 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. **PST** TITLE ☐ Delete RAMANAUSKAS, SIGITA NAME STREET ADDRESS 2922 RIVER POINT DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BCH SHORES FL TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE 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 received it 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 attachmen fith an address, with all other like empowered SIGNATURE: