FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 16, 2001 8:00 am Secretary of State **DOCUMENT # G74138** 1. Entity Name JRZ INDUSTRIES, INCORPORATED 04-16-2001 90054 042 ***150.00 Principal Place of Business Mailing Address 8443 4TH STREET NO 8443 4TH STREET NO ST PETERSBURG FL 33702 ST PETERSBURG FL 33702 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2363812 Not Applicable -Zip -\$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 ZINSLER, JAMES R. Street Address (P.O. Box Number is Not Acceptable) 4591 44TH STREET S. ST PETERSBURG FL 33711 City St. Petersburg 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 OFFICERS AND DIRECTORS 12. 11. Addition TITLE ☐ Delete JRZ (same) ZINSLER, JAMES R NAME NAME 3110 9th Ave No. STREET ADDRESS STREET ADDRESS 4591 44TH STREET S. St. Peteroburg FL DMD (same) CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33711 ☐ Delete NAME DALTON, DENNIS M. NAME 800 South Dakota #105 Tampa FL 33606 STREET ADDRESS STREET ADDRESS 4591 44TH ST SQ. CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33711 Change Addition TITLE D ☐ Delete NAME ZINSLER, FRANK G. NAME STREET ADDRESS 6252 SUNDANCE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ZEPHYRHILLS FL 33540 Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 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.

James R. Zinsler