2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 24, 2001 8:00 am Secretary of State DOCUMENT # G79706 1. Entity Name HILLSBORO PROPERTY INVESTMENTS, INC. 04-24-2001 90303 001 ***158.75 Mailing Address Principal Place of Business 1194 N OCEAN BLVD VILLA 50 JUPITER LAW CENTER 6390 INDIANTOWN RD STE 30 Villian HILLSBORO BEACH FL 33062 JUPITER FL 33458 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2422775 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GUMSON, ADAM S Street Address (P.O. Box Number is Not Acceptable) CHASEWOOD PLAZA SUITE 30 6390 INDIANTOWN RD JUPITER FL 33062 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. 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 After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition PD □ Delete TITLE TITLE NAME GAUDREAU, ANDRE NAME STREET ADDRESS 9 TRAVERSE LAVAL CP1400 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP QUEBEC, CANADA ☐ Addition ☐ Change Delete TITI F TITLE NAME GAUDREAU, PIERRE NAME STREET ADDRESS STREET ADDRESS 750 S FEDERAL HWY CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33062 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-708 CITY-ST-ZIP Change ☐ Addition TITI F ☐ Delete 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 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Is filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if with all other like engineered. 13. I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver of tustee employees. changed, or on an attachment

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