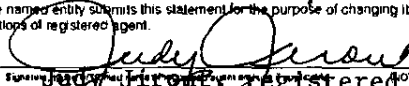
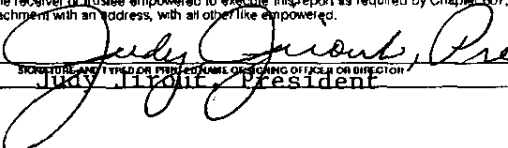


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SECRETARY OF STATE
TALLAHASSEE, FLORIDAAMENDED
**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # G95902			
1. Entity Name LITTLE PRINCESS INVESTMENT CORP.			
Principal Place of Business 7136 N. LEEWYNN DR SARASOTA, FL 34240 US		Mailing Address 7136 N. LEEWYNN DR SARASOTA, FL 34240 US	
2. Principal Place of Business 14375 Pambar Ave.		3. Mailing Address PO Box 27115	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Pt. Charlotte, FL		City & State El Jobean, FL	
Zip 33953	Country US	Zip 33927	Country
4. FEI Number 59-2748872		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LADISLAR, STOHANZI 7136 N. LEEWYNN DR SARASOTA, FL 34240		7. Name and Address of New Registered Agent Name Judy Jirout Street Address (P.O. Box Number is Not Acceptable) 14375 Pambar Ave. City Pt. Charlotte FL Zip Code 33953	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 7/31/03 NOTE: Signature of registered agent required when appointing			
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STOHANZI, LADISLAV 7136 N. LEEWYNN DR SARASOTA, FL 34240 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, S, T, D Judy Jirout PO Box 27115 El Jobean, FL 33927 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RIHONKOVA, ALENA HURSKA 14 PRAHAG 9 CZECH REP. ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400022066504 08/05/03--01029--002 **61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  Judy Jirout, President		Date 7/31/03 (941) 624-4757	

UP2E034 (1/02)

7/8/15