2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Feb 20, 2003 8:00 am Secretary of State H71936 DOCUMENT # 1. Entity Name 02-20-2003 90109 040 ***150.00 TSAKO, INC. Principal Place of Business Mailing Address 7102 N. SEABURY COURT 7102 N. SEABURY COURT **TAMPA FL 33615 TAMPA FL 33615** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-2559313 Zip Country Not Applicable Country \$8.75 Additional 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BESSLER, JUDITH A. 7102 N. SEABURY COURT Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33615** 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. I am familiar with, and accept 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 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing Make Check Payable to Florida Department of State \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TVP TITLE ☐ Delete TITLE BESSLER, JUDITH A. [] Change Addition NAME STREET ADDRESS 7102 N. SEABURY CT. STREET ADDRESS CITY-ST-7IP TAMPA FL 33615 3R2E034 CITY-ST-7IP ☐ Delete TITLE BESSLER, GEORGE R ☐ Change Addition NAME STREET ADDRESS 7102 SEABURY STREET ADDRESS CITY-ST-ZIP TAMPA FL 33615 CITY-ST-ZIP ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP TITLE ☐ Delete TITLE NAME Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED