2001 UNIFORM BUSINESS REPORT (UBR)

Apr 27, 2001 8:00 am Secretary of State **DOCUMENT # J19761** MARTY LITTLE ASSOCIATES, INC. 04-27-2001 90366 048 ***150.00 Principal Place of Business Mailing Address % MARTIN V.C. LITTLE % MARTIN V.C. LITTLE 888 NORTH FIG TREE LANE 888 NORTH FIG TREE LANE PLANTATION FL 33317 PLANTATION FL 33317 2. Principal Place of Business 3. Mailing Address 888 N. Fig Tree Lane Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Plantatión , City & State 4. FEI Number Applied For 59-2698972 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired -33317 Fee Required ⇒ USA T 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LITTLE, MARTIN V.C. Street Address (P.O. Box Number is Not Acceptable) 888 FIG TREE LANE North PLANTATION FL 33317 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. 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 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00 TITLE ☐ Delete ☐ Change ☐ Addition LITTLE, MARTIN V.C. NAME NAME STREET ADDRESS 888 N FIG TREE LN STREET ADDRESS CITY-ST-ZIP PLANTATION FL CITY-ST-ZIP ___ Addition ☐ Change TITLE ☐ Delete TITLE LITTLE, JANET L. NAME NAME STREET ADDRESS STREET ADDRESS 888 N. FIG TREE LANE CITY-ST-7IP CITY-ST-ZIE PLANTATION FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP on supplied with this filing loes no qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information emental report is true and accurage and that my signature shall have the same legal effect as if made under oath; that I am an officer or director true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the information in the information of the property of the information of I hereby certify that the informal indicated on this report or supplied. changed, or on an attachn SIGNATURE: April 9, 2001

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin V.C. Little