2001 UNIFORM BUSINESS REPORT (UBR)

Apr 19, 2001 8:00 am Secretary of State **DOCUMENT # J67116** 1. Entity Name ASTERISK REALTY, INC. 04-19-2001 90017 030 ***150 00 Principal Place of Business Mailing Address 2848 E OAKLAND PARK BLVD % FREDERICK H. INGHAM FT LAUDERDALE FL 33306 P O BOX 11047 US FT LAUDERDALE FL 33339-1047 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0002500 Not Applicable Zip Country Country **\$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 INGHAM, FREDERICK H. Street Address (P.O. Box Number is Not Acceptable) 2848 NE 25TH ST FT LAUDERDALE FL 33305 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition NAME INGHAM, FREDERICK H. STREET ADDRESS STREET ADDRESS 2848 E OAKLAND PARK BLVD CITY-ST-ZIP CITY-ST-7IP FT LAUDERDALE FL 33306 TITLE ☐ Delete TITLE Change ☐ Addition NAME INGHAM, RICHARD S NAME STREET ADDRESS 2848 E OAKLAND PARK BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FT LAUDERDALE FL 33306 🗀 🔲 Delete TITLE TITLE NAME INGHAM, RICHARD S, JR NAME STREET ADDRESS 2848 E OAKLAND PARK BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33306 TITLE ☐ Delete TITLE Change Addition NAME NAME INGHAM, TIMOTHY, C. STREET ADDRESS STREET ADDRESS 2848, EnnOAKLAND PARK BLYD. CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

4/12/01

954) 5lde-7559

☐ Change

Addition

Daytime Phone #