2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 27, 2000 8:00 am Secretary of State DOCUMENT # K03844 1. Entity Name RIDDON (FLORIDA), INC. 01-27-2000 90049 010 ***150.00 Principal Place of Business Mailing Address 800 E HALLANDALE BEACH BLVD 800 E HALLANDALE BEACH BLVD HALLANDALE FL 33009 HALLANDALE FL 33009-4477 LUULUULL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0019208 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DALE, CHARLES S., JR. Street Address (P.O. Box Number is Not Acceptable) 2765 W. CYPRESS CREEK ROAD SUITE B FT. LAUDERDALE FL 33309 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 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 Tax filing requirement and elects to do so. After MAY 1, 2000 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 12 ☐ Addition TITLE TITLE Change ☐ Delete NAME TSE. SUK FUN STREET ADDRESS STREET ADDRESS 1435 N.E. 181ST STREET CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME TSE, CHOK YIN STREET ADDRESS STREET ADDRESS 1435 N.E. 181ST STREET CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☐ Delete TITLE Change ☐ Addition TITLE TONG, CHEUK SUN NAME NAME STREET ADDRESS STREET ADDRESS 1435 N.E. 181ST STREET . CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 TITLE ☐ Change ☐ Addition TITLE ☐ Delete TONG, CHEUK MAN NAME NAME STREET ADDRESS STREET ADDRESS 1435 N.E. 181ST STREET CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☐ Change ☐ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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. SIGNATURE:

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