2001 UNIFORM BUSINESS REPORT (UBR) Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # K59444** 1. Entity Name SONIA'S SEASIDE PROPERTIES, INC. 04-30-2001 90001 031 ***150.00 Mailing Address Principal Place of Business 2175 DE LA MONTAGUE 2175 DE LA MONTAGUE 300 MONTACAL QUEBEC H3-6128 MONTACAL QUEBEC H3-6128 3. Mailing Address 2. Principal Place of Business 2175 Del MONTAGNE 175 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 300 300 City & State 4. FEI Number Applied For City & State 98-0113038 outreal Not Applicable ONTREA \$8.75 Additional Zip 5. Certificate of Status Desired H36 128 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEDERER, STEVEN L Street Address (P.O. Box Number is Not Acceptable) 2450 NE MIAMI GARDENS DR SUITE 100 NORTH MIAMI BEACH FL 33180 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 (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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) Change ☐ Addition ☐ Delete TITLE Db TITLE BEAUCHAMP SO NIA NAME BEAUCHAMP, SONIA NAME LA MONTAQUE De **ጊ** ባ5 STREET ADDRESS 2175 DELT MONTAGUE STE 300 STREET ADDRESS CITY-ST-ZIP H36 128 Montren CITY-ST-ZIP MONTACAL QUEBEC H3-6128 Addition TIT! F TITLE DVS □ Delete BEAUCHAMP, KARL 6. NAME BEAUCHAMP, KARL G NAME Moutag Me DeLA STREET ADDRESS STREET ADDRESS 2175 DE LA MONTAGUE STE 300 CITY-ST-7IP CITY-ST-ZIP **MONTACAL QUEBEC H3-6128** Delete TITLE: TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Detete TITLE TITE F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP tated in Section 119.07(3)(i), Florida Statutes. I further certify that the information I have the same legal effect as if made under oath; that I am an officer or director chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if g does not qua I hereby certify that the information indicated on this report or supplem for the exemption supplied with report is of the corporation or the receiver of changed, or on an attachment with

SIGNATURE:

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