2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 06, 2001 8:00 am Secretary of State **DOCUMENT # K66946** 1. Entity Name BP HOLDINGS, INC. 03-06-2001 90013 040 ***150.00 Principal Place of Business Mailing Address 2501 63RD AVE. E 2501 63RD AVE. E **BRADENTON FL 34203 BRADENTON FL 34203 LUU23Ub1** 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 65-0102839 Applied For 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 BREITER, DAVID J. 2501 63RD AVENUE EAST **BRADENTON FL 34203** 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, typed or printer ed agent and title if applicable DATE FILE NOW!!! FEE-15.\$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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CD TITLE ☐ Delete TITLE ☐ Change ☐ Addition PRICE, BEN E. NAME NAME STREET ADDRESS 2501 63RD AVE. E STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34203** CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition BREITER, DAVID J. NAME NAME 2501 63RD AVE. E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34203** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition PRICE, BRETT NAME NAME 2501 63RD AVE. E STREET ADDRESS STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition MARTIN, DOUG NAME NAME 2501 63RD AVE. E STREET ADDRESS STREET ADDRESS **BRADENTON FL 34203** CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Addition ☐ Delete ☐ Change 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR