2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 06, 2001 08:00 AM K78174 DOCUMENT # Entity Name **Secretary of State** DAVID LASTER INC. Principal Place of Business Mailing Address 426 BAHIA HONDA RD 426 BAHIA HONDA RD KEY LARGO FL KEY LARGO FL33037 33037 US 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 59-2944102 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOROWITZ EDNA 208 TIDE AVE Street Address (P.O. Box Number is Not Acceptable) TAVERNIER FL33070 US 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 02/06/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (11/00) ☐ Addition NIINN JIMMIE. MAME NAME 10240 SW 173 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33157 CITY-ST-ZIP ☐ Delete \mathbf{v} TITLE ☐ Change NAME CHAMPAGNE RICHARD NAME STREET ADDRESS 438 BAHIA HONDA RD STREET ADDRESS CITY-ST-ZIP KEY LARGO FL 33037 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition CASTILLO ANTONIO NAME STREET ADDRESS 28 TARPON AVEN STREET ADDRESS CITY-ST-ZIP MIAMI 33037 CITY-ST-ZIP ☐ Delete TITLE Change Addition LASTER BRET NAME STREET ADDRESS 943 PLANTATION RD STREET ADDRESS CITY-ST-ZIP KEY LARGO 33037 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LASTER DAVID NAME STREET ADDRESS 426 BAHIA HONDA RD STREET ADDRESS CITY-ST-ZIP KEY LARGO 33037 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition 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: David Laster 02/06/2001

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR