2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED **DOCUMENT # K82653** Mar 31, 2000 8:00 am 1. Entity Name Secretary of State CASUAL LIVING U.S.A., INC. 03-31-2000 90091 044 ***158.75 Principal Place of Business Mailing Address 5401 HANGAR CT. 5401 HANGAR CT. TAMPA FL 33634-5341 TAMPA FL 33634 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State ...59-2948796 Not Applicable Country \$8.75 Additional Zip Country X 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BOGGS, E. JACKSON Street Address (P.O. Box Number is Not Acceptable) 501 EAST KENNEDY BLVD. SUITE 1700 **TAMPA FL 33602** 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 primed 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 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. 🚋 Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. PD ☐ Change Addition Delete TITLE TITLE FRANZBLAU, ROBERT M. NAME NAME STREET ADDRESS 5401 HANGAR COURT STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE HILL, FRANK H NAME STREET ADDRESS STREET ADDRESS 5401 HANGAR CT CITY-ST-ZIP TAMPA FL CITY-ST-7IP Addition ☐ Change □ Delete TITLE LEOPOLD, GERALD NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL Addition Change ☐ Delete TITLE TITLE Franzblau, jo z NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TAMPA FL ☐ Change Addition TITLE TITLE ☐ Delete FRANZBLAU, CARLO NAME NAME STREET ADDRESS 5401 HANGAR CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL. ☐ Change Addition TITLE TD ☐ Delete TITLE DORR, ALIX NAME NAME STREET ADDRESS STREET ADDRESS 5401 HANGAR CT CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 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 of suppliemental 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