2002 UNIFORM BUSINESS REPORT (UBR)

Jul 30, 2002 8:00 am Secretary of State DOCUMENT # K84030 1. Entity Name 07-30-2002 90384 015 ***150.00 SHWEKY FINANCIAL SERVICES, INC. Principal Place of Business Mailing Address 666 NE 125TH STREET. #237 666 NE 125TH STREET. #237 N. MIAMI FL 33179 N. MIAMI FL 33179 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 65-0116679 Not Applicable Zip Country Zip 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 Name SHWELY, SEYMOUR Street Address (P.O. Box Number is Not Acceptable) 666 NE 125 ST SUITE 237 N MIAMI FL 33161 City 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. I am familiar with, and accept Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change NAME ☐ Addition SHWEKY, SEYMOUR NAME STREET ADDRESS 666 NE 125TH ST., #237 STREET ADDRESS CITY-ST-ZIP N. MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE

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

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: <

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

FILED

SunAmerica Securities, Inc.

Member NASD, SIPC

666 NE 125 Street Suite 237 North Miami FL 33161 305.891.2211 Toll Free 1.800.329.2211 Residence 954.987.5577 Fax 395 821 \$6525, 2002

Seymour Shweky Registered Principal

SunAmerica Securities A SunAmerica Company

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILLINGS P.O. BOX 1500 TALLAHASSEE, FL 32302-1500

GENTLEMEN:

THIS IS TO INFORM YOU THAT I NEVER RECEIVED MY NOTICE FOR THE MAY 1ST FILING..

I HAVE PAID THIS FOR YEARS ON A TIMELY BASIS. I WOULD APPRECIATE IT VERY MUCH IF YOU CAN WAIVE THIS PENALTY. IMPOSED THIS TIME.DUE TO THE CIRCUMATANCES MENTIONED.

SINCERELY

SEYMOUR SHWEKY

PRESIDENT