2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # K85864 May 12, 2000 8:00 am 1. Entity Name Secretary of State DNS INDUSTRIES, INC. 05-12-2000 90085 047 ***150.00 Principal Place of Business Mailing Address 5979 N.W. 151TH ST 5979 N.W. 151TH ST **SUITE 212** SUITE 212 MIAMI FL 33014 MIAMI FL 33014-2427 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 65-0126980 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHANTZ, LAWRENCE M ESQ Street Address (P.O. Box Number is Not Acceptable) SUITE 3650 FIRST UNION FINANCIAL 200 SOUTH BISCAYNE BLVD **MIAMI FL 33131** Zip Code FL 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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition Change TITLE ☐ Delete SCHAECTER, DAVID NAME STREET ADDRESS STREET ADDRESS 3000 NW 125TH ST CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33167 [] Change Addition TITLE TITLE Delete SHARF, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 3000 NW 125TH ST CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33167 DEVP Change ☐ Addition TITLE Delete TITLE SCHAECTER, NEAL NAME NAME STREET ADDRESS STREET ADDRESS 3000 NW 125TH ST CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change ☐ Addition ☐ Delete TITLE TITLE SCHAECTER MARVIS NAME NAME STREET ADDRESS STREET ADDRESS 3000 NW 125TH ST. CITY-ST-7IP CITY-ST-ZIP MIAMI FL 3316-7 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE 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.