2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 06, 2001 8:00 am Secretary of State **DOCUMENT # K92052** 1. Entity Name SELECT AMERICAN REALTY, INC. 02-06-2001 90266 004 ***150.00 Principal Place of Business Mailing Address C/O KEVIN REDMOND C/O KEVIN REDMOND 3399 SW 42ND AVENUE 3399 SW 42ND AVENUE PALM CITY FL 34990 PALM CITY FL 34990 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 NOT APPLICABLE Not Applicable 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 REDMOND, KEVIN Street Address (P.O. Box Number is Not Acceptable) 3399 SW 42ND AVENUE PALM CITY FL 34990 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) 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Change ☐ Addition NAME REDMOND, KEVIN NAME STREET ADDRESS 6960 SW GATOR TRAIL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL 34990 TITLE Delete TITLE Change ☐ Addition NAME KAYLIE, HARVEY NAME STREET ADDRESS 13 NEPTUNE AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BROOKLYN NY 11235 Delete TITI F ☐ Change ☐ Addition NAME KAYLIE, GLORIA NAME STREET ADDRESS 13 NEPTUNE AVE. STREET ADDRESS C/TY-ST-ZIP CITY-ST-ZIP BROOKLYN NY 11235 TITLE ☐ Delete. TITLE ☐ Change ☐ Addition NAME KAYLIE, ROBERTA NAME STREET ADDRESS 13 NEPTUNE AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BROOKLYN NY 11235 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 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.

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR