2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 13, 2001 8:00 am Secretary of State **DOCUMENT # K95922** TONI & RENELLYS, INC. 03-13-2001 90319 017 ***150.00 Principal Place of Business Mailing Address 695 W 17TH ST. 695 W 17TH ST. HIALEAH FL 33010 HIALEAH FL 33010 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 65-0165811 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 WALKER, MICHAEL B. Street Address (P.O. Box Number is Not Acceptable) 2 S. BISCAYNE BLVD **SUITE 1940 MIAMI FL 33131** City 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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete CR2E034 (10/00) TITLE Change Addition PEREZ, ANTONIO NAME NAME STREET ADDRESS 3551 SW 126 AVE STREET ADDRESS CITY-ST-ZIF MIRAMAR FL CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME PEREZ. RENELLYS NAME STREET ADDRESS 3551 SW 126 AVE STREET ADDRESS CITY-ST-ZIP MIRAMAR FL CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition SAAVEDRA, RENELLYS C. NAME NAME STREET ADDRESS 3551 SW 126TH AVE STE 147 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL TITLE ☐ Delete TITLE Change Addition PREZE, REBECCA E NAME NAME STREET ADDRESS 3551 SW 126TH AVE STE 147 STREET ADDRESS CITY-ST-7IP MIRAMAR FL CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

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