2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # L10304** Apr 19, 2000 8:00 am Secretary of State CONSOLIDATED VENTURES, INC. 04-19-2000 90015 001 ***150.00 Principal Place of Business Mailing Address C/O ANGELINA N. VILARDEBO C/O ANGELINA N. VILARDEBO 606 BARCELONA COURT 606 BARCELONA COURT SATELLITE BEACH FL 32937 SATELLITE BEACH FL 32937-3908 2. Principal Place of Business 3. Mailing Address 100 RIVERSIDE DR 00 RIVERSIDE DR. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE # 706 # 706 Applied For City & State City & State 4. FEI Number 59-2964621 Not Applicable COCO A COCOA Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 3<u>2922</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VILARDEBO, ANGELINA N Street Address (P.O. Box Number is Not Acceptable) 606 BARCELONA COURT 100 RIVERSIDE DR. SATELLITE BEACH FL 32937 COCOA 72922 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. (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. Change ☐ Addition TITLE TITLE ☐ Delete HODRESS VILARDEBO, ANGELINA N. NAME MORIVERSIDE DR. # 106 606 BARCELONA COURT STREET ADDRESS STREET ADDRESS CITY-ST-7IP SATELLITE BEACH FL CITY-ST-ZIP COCOA, FL 32922 ☐ Delete Change ☐ Addition TITLE TITLE VILARDEBO, CHARLES K. NAME NAME ADDRESS 606 BARCELONA COURT 100 RIVERSIDE DR. #706 STREET ADDRESS STREET ADDRESS SATELLITE BEACH FL CITY-ST-ZIP CITY-ST-7IP COCOA, FL 32922 - Change --- Delete ---TITLE TITLE VILARDEBO, KENNETH M. NAME NAME **606 BARCELONA COURT** 435 SHERWOOD AVE. STREET ADDRESS STREET ADDRESS SATELLITE BEACH FL CITY-ST-ZIP CITY-ST-ZIP SATELLITE BEACH, FL 32937 ☐ Channe ☐ Addition ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition 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 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.

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR N. VII AR DE BO 4/0/00 (321)433-080

CR2E034 (9/99