2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am secretary of State L21847 DOCUMENT # 1. Entity Name RANDY SMITH ENTERPRISES, INC. 03-06-2002 90121 024 ***150.00 Principal Place of Business Mailing Address % ROLAND SMITH, JR. % ROLAND SMITH, JR. 8070 PASADENA BLVD. 8070 PASADENA BLVD. PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0152244 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 SMITH, ROLAND, JR. Street Address (P.O. Box Number is Not Acceptable) 8070 PASADENA BLVD. PEMBROKE PINES, FL 33024 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. SEPTEMBROOMS TOO 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, 2002 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 CR2E034 (9/01) TITLE Delete TITLE Change ☐ Addition SMITH, ROLAND, SR NAME NAME STREET ADDRESS 8070 PASADENA BLVD. STREET ADDRESS PEMBROKE PINES FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME SMITH, ROLAND, JR. STREET ADDRESS 8070 PASADENA BLVD. STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES FL 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-7IP CITY-ST-ZIP Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition 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 of the corporation of the corporation of the corporation of the corporation of the receiver or trustee empowered.

Roland Smith, In

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SIGNATURE:

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154-432-7646