2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 30, 2001 8:00 am Secretary of State **DOCUMENT # L71369** 1. Entity Name SCERBO, INC. • د چې 01-30-2001 90061 011 ***150.00 Principal Place of Business Mailing Address % EUGENE F. SCERBO % EUGENE F. SCERBO 1319 E COMMERCIAL BLVD 1319 E COMMERCIAL BLVD FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334 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 65-0191074 Not Applicable Zip Country 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 SCERBO, EUGENE F. Street Address (P.O. Box Number is Not Acceptable) 1319 E COMMERCIAL BLVD FT LAUDERDALE FL 33334 City 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, 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition ☐ Change MARY BARNES 1319 E COMM BLUD SCERBO, EUGENE F. NAME NAME STREET ADDRESS 1319 E COMMERCIAL BLVD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP FT. LAUDEV DALLE, EL VΡ TITLE Delete TITLE ★ Addition Change ANTHONY WONG 1319 E COMM. BLVD SCERBO, SYLVIA NAME STREET ADDRESS STREET ADDRESS 1319 E. COMMERCIAL BLVD. CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP FT. LAMPERDALE FL ☐ Delete TITLE ☐ Addition Change SCERBO, MICHELLE NAME STREET ADDRESS 1319 E. COMMERCIAL BLVD STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP TITLE Delete TITLE ☐ Addition Change 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-ZIP CITY-ST-7iP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME 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.

F. SerborRES. 1/15/01