2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like-

SIGNATURE:

FILED **DOCUMENT # L86370** Jan 14, 2000 8:00 am Secretary of State FIRTH & ASSOCIATES REALTY, INC. 01-14-2000 90038 018 ***150.00 Mailing Address Principal Place of Business 601 S. FEDERAL HWY 601 S. FEDERAL HWY LAKE WORTH FL 33460-4952 LAKE WORTH FL 33460 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0218511 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Nāme' FIRTH, JAMES A. 2642 FOREST HILL BLVD. WEST PALM BEACH FL 33406 8. The above named entity submits this statement for the purpose of changing its registerer office SIGNATURE 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Addition ☐ Delete TITLE TITLE FIRTH, JAMES A. NAME STREET ADDRESS 2761 VILLAGE BLVD #304 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP WEST PALM BCH FL 33469 Change ☐ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

mpowered.

G OFFICER OR DIRECTOR