2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

00 MAY 22 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000009089

1. Entity Name

SOUTH BAY ENTERPRISES, L.L.C.

Principal Place of Business
1832 S.W. 50TH TERRACE
CAPE CORAL, FL. 33914

Mailing Address
1832 S.W. 50TH TERRACE
CAPE CORAL, FL. 33914

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0990983 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHUTT, DARRIN R. ESQUIRE
1105 CAPE CORAL PARKWAY E.
SUITE C
CAPE CORAL, FL. 33904

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City | FL | 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

9. This corporation is eligible to satisfy its Intangible *Tax filing requirement and elects to do so.* (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Delete MGRM VETTER, EVA 1832 S.W. 50TH TERRACE CAPE CORAL, FL. 33914	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition MGRM VETTER, RUEDIGER 1832 S.W. 50TH TERRACE CAPE, CORAL, FL. 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete MGRM THOUSAND ISLAND CORPORATION 3110 SOUTH WADSWORTH BLVD. SUITE 102 DENVER, CO. 80227	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 900003289543--3 -06/14/00--01101--004 *****50.00 *****50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE: Vetter Ruediger — 4/17/00 — 941 540 874

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #