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ENVERO H. HAYES TO THE TOTAL TO THE TOTAL TOTAL

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Sep 13, 2001 8:00 am Secretary of State 1. Entity Name 09-13-2001 90018 021 ****61.25 KREAM PRODUCTIONS, INC. Principal Place of Business Mailing Address 801 SOUTH KOTTLE CIRCLE 801 SOUTH KOTTLE CIRCLE DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 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 *59-369035*3 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HAYE'S, EDWARD H JR. 80T SOUTH KOTTLE CIRCLE DAYTONA BEACH FL 32114 Zip Code 3 2 / / 4 8. The above named entity submits this statement for the purpose of changing its registered office or (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. After September 12, 2001, min. will be \$236.25 Added to Fees Department of State 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. Board MEMDER TITLE ☐ Delete TITLE Change Dr. Hiram Powell 640 Dr. Mery M. Bethuse Blud HAYES, EDWARD H JR. NAME NAME STREET ADDRESS **801 SOUTH KOTTLE CIRCLE** STREET ADDRESS CR2E037 Daytona BEASH, FL 32114 CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP TITLE Board Member ☐ Delete TITLE ☐ Change T Addition Johnnie Wekl HAYES, JOERETHA S NAME NAME STREET ADDRESS 801 SOUTH KOTTLE CIRCLE STREET ADDRESS 2043 UNION STI Sti Petersburg, FL 33712 CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP Board Member Connie Welch TITLE ☐ Delete TITLE ☐ Change Addition CHARITY, LAVETA C NAME NAME 2043 UNION St. STREET ADDRESS **801 SOUTH KOTTLE CIRCLE** STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP St. Petersburg, FL 33712 TITLE ☐ Delete TITLE Change Addition Archie L. Thompson, JR. 3026 35 th TERRALE S. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP St. Petersburg, FL 33712 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.