2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2003
Secretary of State

DOCUMENT# N01000004378

Entity Name: VERBAL MILK, INC.

Current Principal Place of Business:

2730 STANWOOD AVE.
JACKSONVILLE, FL 322074630

New Principal Place of Business:

Current Mailing Address:

2730 STANWOOD AVE.
JACKSONVILLE, FL 322074630

New Mailing Address:

FEI Number: 59-3701865 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, GREGORY P
2730 STANWOOD AVE.
JACKSONVILLE, FL 322074630 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: SMITH, GREGORY
Address: 2730 STANWOOD AVE.
City-St-Zip: JACKSONVILLE, FL 322074630

Title: SD ( ) Delete
Name: JONES-SMITH, RHEFINETTE
Address: 2730 STANWOOD AVE.
City-St-Zip: JACKSONVILLE, FL 322074630

Title: TD ( ) Delete
Name: JONES, CHIAYNA
Address: 2140-D CLEMONT LANE
City-St-Zip: TALLAHASSEE, FL

Title: MOB ( ) Delete
Name: LANDORN, MARIA
Address: 5940 SOUTH INDIANA
City-St-Zip: CHICAGO, IL 60637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY SMITH SD 05/23/2003

Electronic Signature of Signing Officer or Director — Date