## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 30, 2002 8:00 am § Secretary of State **DOCUMENT # N34228** 1. Entity Name 04-30-2002 90224 014 \*\*\*\*70.00 FRIENDS SERVICES INTERNATIONAL, INC. Mailing Address Principal Place of Business 211 N.W. 102 STREET 211 N.W. 102 STREET MIAMI FL 33150 MIAMI FL 33150 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State NOT APPLICABLE Not Applicable \$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 Name Street Address (P.O. Box Number is Not Acceptable) PELZER, DAGMAR 211 NW. 102 STREET **MIAMI FL 33150** City 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 (NOTE: Registered Agent signature required when reinstating) DATE Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. **Department of State** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10 (9/01 TITLE ☐ Addition TITLE CPD ☐ Delete NAME NAME SELF. JOHN A STREET ADDRESS STREET ADDRESS P.O. BOX 153, BISHOP DESMOND SMITH STREET CITY-ST-ZIP CITY-ST-ZIP SAN IGMACIO, BELIZE CITY ☐ Delete TITLE TITLE VTD NAME NAME WILLIAMS, LEONARD STREET ADDRESS STREET ADDRESS P.O. BOX 153, BISHOP DESMOND SMITH STREET CITY-ST-ZIP CITY\*ST\*ZIP\* SAN IGMACIO. BELIZE CITY ☐ Addition TITLE ☐ Delete TITLE SD NAME NAME CAMERON, GEORGE D STREET ADDRESS CALLE 93, #524 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YUCATAN 97000 ☐ Addition ☐ Delete TITLE NAME NAME CORDRAY, DICK STREET ADDRESS STREET ADDRESS 6016 TRENT DR CITY-ST-ZIP CITY-ST-ZIP **HUNTSVILLE AL 35810** TITI F ☐ Delete Change ☐ Addition NAME DAGHAR, PELZER STREET ADDRESS STREET ADDRESS 211 N.W. 102 STREET CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33150 ☐ Delete Change ☐ Addition TITLE D 13 OZACK PLACE NAME NAME JONES, CHUCK STREET ADDRESS STREET ADDRESS 2915 OZARD ROAD

12. Thereby certify that the information supplied with this filling 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 w

CITY-ST-ZIP

SIGNATURE:

CHATTANOOGA TN 37415

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REJOHN A. Self