2002 UNIFORM BUSINESS REPORT (UBR)

Mar 11, 2002 8:00 am Secretary of State DOCUMENT # N94000004952 03-11-2002 90054 047 ****61.25 WINGS OF VICTORY INTERNATIONAL, INC. Principal Place of Business Mailing Address 7924, 10TH AVE., SOUTH 7831 10TH AVE., SOUTH STEPETERSBURG FL 33707 ST. PETERSBURG FL 33707 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3272560 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RAGLAND, GEORGE E 7831 10TH AVE., SOUTH ST. PETERSBURG FL 33707 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **-**:-9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61,25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD TITLE ☐ Change ☐ Addition TITLE □ Delete RAGLAND, GEORGE E NAME NAME STREET ADDRESS 7831 10TH AVE. SOUTH STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST. PETERSBURG FL 33707 VSTD TITLE ☐ Addition TITLE Delete Change RAGLAND, BARBARA T NAME NAME 7831 10TH AVE., SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY*ST-7IP ST. PETERSBURG FL 33707 ☐ Delete Change ☐ Addition TITLE Daniell, T. Evan NAME NAME STREET ADDRESS 3467 E. RIVERSIDE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33916 ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition 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 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. GEORGE ERAGIAND 2/16/0V

FILED