2000 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the rec changed, or on an attachmen

SIGNATURE:

FILED DOCUMENT # N98000004790 May 07, 2000 8:00 am 1. Entity Name **Secretary of State** SAO PAULO ASSOCIATION OF THE SOVEREIGN MILITARY 05-07-2000 90027 023 ****61.25 Principal Place of Business Mailing Address 811 GEORGE BUSH BLVD. 811 GEORGE BUSH BLVD. DELRAY BEACH FL 33483-5719 DELRAY BEACH FL 33483 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0863740 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CARNEY, THOMAS F JR. <u>811 George Bush Blyd</u> CHANCE 1x01xNOxCONGRESS AVE.STE 200x Delray Beach, Fl. 33483 BIOYNTONX BEACH FIX 33426 City 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) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition Change PD ☐ Delete TITLE TITLE NAME SAMAIA, DINO NAME STREET ADDRESS STREET ADDRESS **RUA ORLANDO MURGEL. 161** CITY-ST-ZIP CITY-ST-ZIP SAO PAULO, BRASIL 04358 ☐ Addition ☐ Change TITLE VD. Delete TITLE RENEAU, INGO NAME NAME STREET ADDRESS STREET ADDRESS 21682 WESSEX WAY CITY-ST-7IP CITY-ST-ZIP-**BOCA RATON FL 33486** Change ☐ Addition Delete TITLE TITLE CARNEY, THOMAS F JR NAME STREET ADDRESS STREET ADDRESS 811 George Bush Blvd. 1101 N-CONGRESS AVE, STE 200 CITY-ST-ZIP CITY-ST-ZIP BOYNTON BEACH FL 33426 Delray Beach, F1. 33483 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE 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 supplymental 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 repetyer 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

Director