NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90429 001 ****61.25

DOCUMENT # N99000000012

1. Entity Name

13 UGLY MEN, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
306 E. Tyler St.	P.O. Box 172339
Suite, Apt. #, etc. 300	Suite, Apt. #, etc.
City & State Tampa, Florida	City & State Tampa, FL
Zip 33602 Country Hills.	Zip 33672-0239 Country Hills.

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3605715 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Feinberg, Richard B.

Street Address (P.O. Box Number is Not Acceptable): 306 E. Tyler St. Suite 200

City: Tampa **FL** Zip Code: 33602

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Smith, Patrick R. 306 E. Tyler Street #300 Tampa, Fl 33602
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Feinberg, Richard B. 306 E. Tyler St. #200, Tpa
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MEZRAH, LEE 5350 W. Kennedy Blvd. Tampa, Florida 33609
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Ric Feinberg, VPD 4/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #