FILED
May 28, 2002 8:00 am
Secretary of State
05-28-2002 91753 027 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000002750

1. Entity Name

ECHOLS TRADING, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	
825 SE Riverside Dr. Suite, Apt. #, etc.	P.O. Box 2688 Suite, Apt. #, etc.	DO NOT WRITE IN THIS SPACE
City & State: Stuart, FL Zip: 34994 Country: Martin	City & State: Stuart, FL Zip: 34995 Country: Martin	4. FEI Number: 65-0975897 ☐ 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: Kevin R. Boaz

Street Address (P.O. Box Number is Not Acceptable): 825 SE Riverside Dr.

City: Stuart FL Zip Code: 34994

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: Kevin R Boaz, Secretary 5/13/2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P ECHOLS, C D 111 Eagles Club Drive Stockbridge, GA 30281
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S/T BOAZ, KEVIN R 825 SE Riverside Dr. Stuart, FL 34994
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CR2E034B (12/01)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin R Boaz, Secretary 5/13/02 (772) 463-4630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Telephone Number