2002 UNIFORM BUSINESS REPORT (UBR)

May 14, 2002 8:00 am Secretary of State P00000005377 DOCUMENT # 1. Entity Name 05-14-2002 90325 008 ***150.00 PITTERS & SONS, INC. Principal Place of Business Mailing Address 10222 NW SCTH STREET 10222 -WW-26TH-STREET CORAL SPRINGS FL 33065 CORAL CPRINCS FL 9306 2. Principal Place of Business 3. Mailing Address 1800 BARCELONA TERRACE 1800 BARCELONA TERRACE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Applied For City & State 4. FEI Number City & State 65-0970091 Not Applicable MARGATE MARGATE. Country \$8.75 Additional 5. Certificate of Status Desired 33063 USA 33063 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PITTERS, LEONARD Street Address (P.O. Box Number is Not Acceptable) 10222 NW 36TH STREET CORAL SPRINGS FL 33965 1800 BARCELONA TERRACE Zip Code 33063 MARGATE 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) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. CR2E034:(9/01) Change ☐ Addition TITLE Defete TITLE PRES PITTERISN, LEDNARD NAME NAME PITTERS, LEONARD 10222 NW 36TH ST. STREET ADDRESS STREET ADDRESS 1800 BARCELONA TERRACE MARGATE, FL 33063 CITY-ST-ZIP CORAL SPRINGS FL-33965 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change~ TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all place like empowered. live empowered changed, or on an attachr

LEONARD PITTERS

4/25/02 954-263-3910

Daytime Phone #

FILED