2001 UNIFORM BUSINESS REPORT (UBR) FILED Aug 22, 2001 08:00 AM DOCUMENT # P0000008653 1. Entity Name **Secretary of State** ACTION CONSULTANT, INC. Principal Place of Business Mailing Address 1335 SW 86TH 1335 SW 86TH MIAMI FL MIAMI FL 33144 33144 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0975015 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FINANCIAL FOUNDATIONS, INC. ORTIZ 3150 SANDY RIDGE DRIVE Street Address (P.O. Box Number is Not Acceptable) 1335 S.W. 86TH COURT CLEARWATER FL33761 US City Zip Code MIAMI 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. MARIA E. ORTIZ 08/22/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Addition CR2E034 (11/00) ☐ Change MAME NAME ORTIZ MARIA ESEC STREET ADDRESS STREET ADDRESS 1335 S.W. 86TH COURT CITY-ST-ZIP CITY-ST-ZIP MIAMI ☐ Delete TITLE X Change NAME ORTIZ GREGORY J NAME ORTIZ GREGORY STREET ADDRESS 1335 SW 86TH STREET ADDRESS 1335 SW 86TH CT CITY-ST-ZIP MIAMI FL 33144 CITY-ST-ZIP MIAMI FL33144 Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

08/22/2001

Daytime Phone #

Date

SIGNATURE: __Gregory J. Ortiz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR