2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 13, 2001 8:00 am DOCUMENT # P0000011358 1. Entity Name Secretary of State YMBR HOLDINGS, INC. 02-13-2001 90002 049 ***150.00 Principal Place of Business Mailing Address 2400 E. COMMERCIAL BUVD., STE. 723 2400 E. COMMERCIAL BLVD., STE. 723 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SELZER, JEFFREY SETH ESQ. 2400 E. COMMERCIAL BLVD., STE. 723 FT. LAUDERDALE FL 33308 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so, After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. SR2E034 (10/00) TITLE ☐ Delete TITLE NAME SELZER, JEFFREY SETH NAME STREET ADDRESS STREET ADDRESS 2400 E. COMMERCIAL BLVD., STE. 723 CITY-ST-ZIP FT. LAUDERDALE FL 33308 CITY-ST-ZIP VTD ☐ Delete TITLE TITLE FENNON, RAY NAME NAME STREET ADDRESS STREET ADDRESS 2400 E. COMMERCIAL BLVD., STE. 723 CITY-ST-ZIE CITY-ST-7IP FT. LAUDERDALE FL 33308 TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

SIGNING OFFICER OR DIRECTOR