2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 01, 2001 8:00 am DOCUMENT # P0000013905 **Secretary of State** REBECCA S. WITT & ASSOCIATES, INC. 03-01-2001 90027 021 ***150.00 Principal Place of Business Mailing Address . 9808 STABLITE DRIVE 301 Apache Trail RIVERVIEW FL 30569 Brandon, FL 33511 301 Apache Itail 9508 STARLINE DRIVE RIVERVIEW EL 33509 Brandon . PL 33511 925630 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 59-3625619 Not Applicable Zìp Country Zip Country \$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 Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 City Zip Code 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS PTD ☐ Delete TITLE ☐ Change Addition NAME WITT, REBECCA S NAME 301 Apache Trail STREET ADDRESS 9500 STABLITE BRIVE STREET ADDRESS CITY-ST-ZIP PIVERVIEW FL 99569 CITY-ST-ZIP Brandon, FL 33511 TITLE SVD ☐ Delete TITLE ☐ Change Addition NAME WITT, EDWARD M NAME 9508 STAPILITE BRIVE 301 Apache Trail STREET ADDRESS STREET ADDRESS CITY-ST-7IP Brandon, P. 33511 CITY - \$T - ZIP Delete TITLE TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ___ Delete TITLE Change Addition NAME MANAF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

☐ Delete

Change

☐ Addition

CR2E034 (10/00)