2001 UNIFORM BUSINESS REPORT (UBR) P00000028824 DOCUMENT # 1. Entity Name ELRETARY OF STATE JEVISION OF CORPORATIONS Escondido Enterprise, Inc. 010CT-1 PM 4: 11 Principal Place of Business Mailing Address 280 Spoonbill Lane SAME Melbourne Beach, FL 32951 3. Mailing Address 2. Principal Place of Business P. O. Box 510771 Suite, Apt. #, etc. Suita, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3636917 Applied For City & State City & State 32951 Melbourne Beach, FL Not Applicable Zip, 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 Tom Cross Street Address (P.O. Box Number is Not Acceptable) 280 Spoonbill Lane Melbourne Beach, FL 32951 City Zip Code FL 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!!! PEE 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. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN .11 P/S/T TITLE Change Delete TITLE ☐ Addition 900004625409-NAME . Tom Cross NAME -10/05/01--01073--018 STREET ADDRESS 280 Spoonbill Lan∈ STREET ADDRESS CR2E034 CITY-ST-ZIP CITY-ST-ZIP ****150.00 ****150.00 32951 Melbourne Beach, FL TITLE Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TIER Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change ☐ Addition Delete NAME NAME

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 attachgight with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/27/01

321-723-3284

Daytene Phone #

JUDY GALLAGHER, C.P.A.

405 E. STRAWBRIDGE AVENUE, SUITE C MELBOURNE, FLORIDA 32901

321-724-1005 Office 321-724-0407 Fax 321-223-0170 Cell dgallag825@aol.com

September 27, 2001

Uniform Business Report Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

Re: Escondido Enterprise, Inc.

Dear Sir or Madam:

Enclosed are my client's 2001 Uniform Business Report and a check for the \$150.00 annual filing fee. I have confirmed with your office that the original UBR was returned undelivered to your office. Please accept the enclosed and reinstate this corporation to the status of "active".

Feel free to contact my office if you require any further information.

Sincerely,

Judy Gallagher

