FILED 2001 UNIFORM BUSINESS REPORT (UBR) Feb 21, 2001 8:00 am DOCUMENT # P0000029013 Secretary of State 1. Entity Name MSS MANAGEMENT INC. 02-21-2001 90057 008 ***150.00 Principal Place of Business Mailing Address 1504 N. GARDEN AVE. 1504 N. GARDEN AVE. CLEARWATER FL 33755 CLEARWATER FL 33755 3. Mailing Address 2. Principal Place of Business 12737 N. FCORIDA AVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State TAMPA, FI 59-3637509 Not Applicable Zip 33612 Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SULLIAMAN, HASHIM Street Address (P.O. Box Number is Not Acceptable) 1504 N. GARDEN AVE. CLEARWATER FL 33755 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS.\$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10.-Election Campaign Financing. After MAY 1, 2001 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (10/00) Change ☐ Addition **PVST** Delete TITLE TITLE SULLIAMAN, HASHIM 1504 N.GARDEN AVE. SULLIAMAN, HASHIM NAME NAME STREET ADDRESS STREET ADDRESS 1504 N. GARDEN AVE. CLEARWATER, FL 33755 CITY-ST-7IP CITY-ST-7IP CLEARWATER FL 33755 ☐ Addition Change ☐ Delete TITLE TITLE SULLIAMAN, HASHIM NAME NAME STREET ADDRESS STREET ADDRESS 1504 N. GARDEN AVE. CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33755 Addition **Change** Delete TITLE TITLE NABIL HABOUBAVE. NAME SULLIAMAN, AOUS NAME STREET ADDRESS STREET ADDRESS 1504 N. GARDEN AVE. TAUPA, FL 33755 CITY-ST-ZIP CITY-ST-7IP **CLEARWATER FL 33755** ☐ Change Addition TITLE TITLE ☐ Delete NABIL HABOUB 1504 D. GARDEN AVE. TAMPA, FL 33755 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TILLE Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS 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

Daytime Phone #

changed, or on an attachment with

an address, with all other like empowered.

SIGNATURE AND TYPED OR PR