## FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 04, 2001 8:00 am DOCUMENT # \$\P00000041349 Secretary of State 05-04-2001 90159 005 \*\*\*150 00 JAIME SANCHEL CRAFTS, INC. TAIME SANCHEZ GRAFTS, INC. 2257 BLUE SPRUCE WAY TAMPA FLA. 33604 U0046846 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JAIME A. SANCHEZ 2257 BLUE SPRUCE WAY Street Address (P.O. Box Number is Not Acceptable) TAMPA, FLA. 33604 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 gistered agent and title if applicable (NOTE: Registered Agen FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition TITLE ☐ Delete TITLE .SAnchez NAME NAME PA FLA. 33604 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

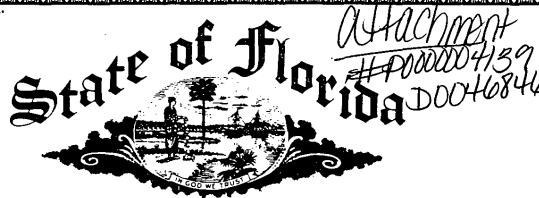
13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is frue and accurate and that my signature shall have the same 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 attack

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ITED NAME OF SIGNING OFFICER OR DIRECTOR



Bepartment of State

I certify from the records of this office that JAIME SANCHEZ CRAFTS, INC. is a corporation organized under the laws of the State of Florida, filed on April 21, 2000.

The document number of this corporation is P00000041349.

I further certify that said corporation has paid all fees due this office through December 31, 2000, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Twenty-fifth day of April, 2000



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Atherine Harris Ratherine Harris Secretary of State