2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P00000049397 1. Entity Name NOW 2000, INC. 04-30-2001 90427 039 ***150.00 Principal Place of Business Mailing Address 2301 N.W. 33RD STREET 2301 N.W. 33RD STREET APT. 112 00000040 APT, 112 FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address 2425 BEACH COURT 2425 BEACH WET Suite, Apt. #. etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For IVERABEACH, RIVIÈ RA BEACH. 65-1009359 Not Applicable \$8.75 Additional 5. Certificate of Status Desired PALM BEACH 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ELLIS, SETH E ESQ. Street Address (P.O. Box Number is Not Acceptable) 7000 W. PALMETTO PARK ROAD SUITE 300 **BOCA RATON FL 33433** 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) 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. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CHANGE ADDRESS ONLY ☐ Change NOW, JOHNNY NAME NAME BEACH COURT 2425 STREET ADDRESS STREET ADDRESS 2301 N.W. 33RD STREET, APT, 112 CITY-SI-ZIP RIVIERA BEACH, FL. 33404 CITY-ST-7IP FORT LAUDERDALE FL 33309 TITLE ☐ Delete TITLE NAME NAME STREET ACCRESS 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 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAMS MAMS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Defete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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, with all other like empowered. SIGNATURE: