2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 23, 2001 8:00 am Secretary of State DOCUMENT # P00000050094 1. Entity Name MERADO, INC. 04-23-2001 90002 032 ***150.00 Principal Place of Business Mailing Address 700 E. BUSINESS HIGHWAY 98 700 E. Business Highway 98 PANAMA CITY FL 32401 PANAMA CITY FL 32401 3. Mailing Address 2. Principal Place of Business 1243 P.O. BUY Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For 4. FEI Number City & State 59-3649073 PANAMA CITY Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TUCKER CHARLES G. MCELHENEY, RANDALL Street Address (P.O. Box Number is Not Acceptable) 700 E. BUSINESS HIGHWAY 98 PANAMA CITY FL 32401 ^{ヹゆ}ろ22405 CITY FL pawa ma 8. The above named entity subgrits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 3.29.01 TUCKER CHARLES SIGNATURE 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PRESIDENT ∠ Addition Delete TITLE TITLE CHARLES G. TUCKER MCELHENEY, RANDALL NAME NAME 603 KRISTANNA DRIVE 700 E. BUSINESS HIGHWAY 98 STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32405 CITY-ST-ZIP PANAMA CITY FL 32401 CITY-ST-ZIP ☐ Addition SECRETORY Change ☐ Delete TITLE TITLE RANDALL MEELHENEY NAME NAME 700 € BUSINESS 98 STREET ADDRESS STREET ADDRESS 32401 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change ☐ Delete TITLE NAME NAME 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-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

G. TUCKER, PRESIDEN

do ess, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with arr

SIGNATURE: