2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 26, 2001 8:00 am DOCUMENT # P0000051510 Secretary of State 1. Entity Name 4050 INVESTMENT CORPORATION 03-26-2001 90134 021 ***158.75 Mailing Address Principal Place of Business 7000 WEST PALMETTO PARK ROAD 7000 WEST PALMETTO PARK ROAD SUITE 200 SUITE 200 **BOCA RATON FL 33433 BOCA RATON FL 33433** 2. Principal Place of Business 3. Mailing Address 4675 Anglers Avenue DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 700 S. Federal Hwy. Suite 200-SZG Applied For Fort Lauderdale FL 4. FEI Nymbe Boca Raton, FL 33432 Not Applicable Country USA \$8.75 Additional 333¹2 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GARELLEK, STEVEN Garellek, Steven Street Ad 7000 WEST PALMETTO PARK ROAD 700 S. Federal Hwy., Suite 200 SUITE 200 Boca Raton, FL 33432 **BOCA RATON FL 33433** o 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 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TOPIDAY TITLE Change ★ Addition ☐ Delete TITLE NAME Gregory C DeJohn NAME STREET ADDRESS STREET ADDRESS 4675 Anglers Avenue CITY-ST-7IP CITY-ST-ZIP Fort Lauderda<u>le FL</u> 64. Lauden ☐ Change Addition 1 Engle TITLE □ Delete TITLE NAME Guy V DeJohn NAME GUY V. Desobo STREET ADDRESS STREET ADDRESS 4675 Angles A 4675 Anglers Avenue CITY-ST-ZIP CITY-ST-7IP Fort Lauderdale, FL fx. Landerdalen Addition PRESIDENT TITLE ____ Delete TITLE Mike Yeary WIKE LEVICE NAME NAME 1230 MM SP YAE STREET ADDRESS STREET ADDRESS 1530 NW 26 Avenue CITY-ST-ZIP POMPANO BUX CITY-ST-ZIP Pompano Beach, FL-☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITI È ☐ Delete TITLE NAME 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: