2003 FOR PROFIT CORPORATION

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)					FILED Apr 28, 2003 8:00 am Secretary of State	
DOCUMENT # P0000060328 1. Entity Name REEF'S EDGE INVESTMENT, INC.					O4-28-2003 91378 021 ***150.00	
Principal Place of Business 215 SANDAL LANE 215 SANDAL LANE 215 SANDAL LANE PALM BEACH SHORE FL 33404 PALM BEACH SHORE FL 33404						
2. Principal Place of Business \$24 BANYAN RJ. Suite, Apt. #, etc. 3. Mailing Address \$24 Suite, Apt. #, etc.			G BANYAW	BANYAW LL CHECK HERE IF MAKING CHANGES		
City & State	o Beach FL	City & State VERO	Seach Fi		4. FEI Number 65-1017436 Applied For Not Applicab	
Zip 32	6. Name and Address of Current	<u></u>	Seach For Country		5. Certificate of Status Desired \$8.75 Additional Fee Required 7. Name and Address of New Registered Agent	
CONLIN & MAC MAHON, P.A. 1860 FOREST HILL BLVD SUITE 105 WEST PALM BEACH FL 33406				Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
the obligati	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	registered Office or	- <u>-</u>	9. Election Campaign Financing Trust Fund Contribution. 9. Added to Fees	
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
STREET ADDRESS	P MENNIER, PAUL C 215 SANDAL LANE PALM BEACH SHORE FL 33404	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	~ 3	20 Nier Paul C ⊠Change □ Additio 26 BANYAN Rd. 1ero Beach FL 32963	
	VP MANNIER, KATHLEEN 215 SANDAL LANE PALM BEACH SHORE FL 33404	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mei 821 Vei	ENOBEACH FL 32963 Change Addition LA BANYAN Rd. LRO BEACH FL 32963	
IITLE NAME Street address City-St-Zip	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
itle Name Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Additio	
ITTLE IAME STREET ADDRESS SITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
STREET ADDRESS SITY-ST-ZIP 12. I hereby condicated of the core	on this report or supplemental report is	s true and accurate and that my owered to execute this report a	STREET ADDRESS CITY-ST-ZIP the exemption state and signature shall be	ave the sa	ection 119.07(3)(i). Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 10 or Block 11 i	

SIGNATURE:

772 - 321 - 3197 Daytime Phone #