1 2001 UNIFORM BUSINESS REPORT (UBR) are ded 05-10-2001 901 20 036 \*\*\* 150.00 DOCUMENT # P0000072462 FILED JAVXIS, JAVIS & LEE ASSOCIATES, INCORPORATED OI MAY 10 PM 1:05 misspe SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 3346 LORETTO ROAD 3346 LORETTO ROAD JACKSONVILLE FL JACKSONVILLE FL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3712762 Not Applicable Country \$8.75 Additional Zip 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 BRANNON, GRAYLING E ESQ Street Address (P.O. Box Number is Not Acceptable) 1536 N. JEFFERSON STREET JACKSONVILLE FL 32209 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 aignature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 JAVIS, MOSES NAME NAME 3346 LORETTO ROAD STREET ADDRESS **CR2E034** STREET ADDRESS JACKSONVILLE FL 32223 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE TITLE Javis, Edna NAME NAME 3346 LORETTO ROAD STREET ADDRESS STREET ADORESS CITY-ST-ZIP JACKSONVILLE FL 32223 CITY-ST-ZIP ☐ Change - · ☐ Addition ☐ Delete DRE TITLE LEE, MELODY NAME NAME 3346 LORETTO ROAD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32223 CHY-ST-ZIP CITY-ST-ZIP Change Addition □ Delete TITLE TITLE LEE, EDWARD L NAME NAME 3346 LORETTO ROAD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32223 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TIDE TITLE JAVIS, JULIAN NAME NAME STREET ADDRESS 3346 LORETTO ROAD STREET ADDRESS Jacksonville FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete 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 ceth; 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.

DNA S.JAVIS

SIGNATURE: