2001 UNIFORM BUSINESS REPORT (UBR)

CITY-ST-ZIP

Jan 30, 2001 8:00 am **DOCUMENT # P00000074164 Secretary of State** INDABOB, INC. 01-30-2001 90216 002 ***150.00 Principal Place of Business Mailing Address 2700 1ST STREET 2700 1ST STREET BRADENTON FL 34208 **BRADENTON FL 34208** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 45-1035841 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TRKINS BLALOCK, LANDERS, WALTERS & VOGLER, P.A. 2700 1ST STREET BRADENTON FL 34208 City 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 e, typed or printed name of registered agent and title if applicable 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 filling requirement and elects to do so. Trust Fund Contribution. \Box 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 PRESIDEN ☐ Delete TITLE ☐ Change Addition TITLE ROBERT G. FIRKINS NAME NAME 2700 1St ST STREET ADDRESS STREET ADDRESS BRADEUTON, Fl. 34208 CITY-ST-ZIP CITY-ST-ZIP SEERETARY ☐ Delete TITLE Change ■ Addition TITLE NAME NAME MILIT STREET ADDRESS 2700 STREET ADDRESS BRADENTON. Fl. 34208 CITY-ST-ZIP CITY-ST-ZIP TREASURER ☐ Delete ☐ Change Addition TITLE TITLE NAME INDA FIRKINS NAME: STREET ADDRESS 2700 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTAN, Fl. 34208 TITLE Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete [] Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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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.

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR