2001 UNIFORM BUSINESS REPORT (UBR)

Feb 16, 2001 8:00 am DOCUMENT # P00000108180 Secretary of State BOWER GROUP, INC. 02-16-2001 90012 002 ***150.00 Principal Place of Business Mailing Address ONE S.E. 3RD AVENUE #2400 ONE S.E. 3RD AVENUE #2400 SUNTRUST INTERNATIONAL CENTER SUNTRUST INTERNATIONAL CENTER MIAMI FL 33131 MIAMI FL 33131 11. 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number Not Applicable ^ Zip Country Zip Country \$8:75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FEUERMAN, JONATHAN ESQ. Street Address (P.O. Box Number is Not Acceptable) ONE S.E. 3RD AVENUE #2400 SUNTRUST INTERNATIONAL CENTER MIAMI FL 33131 Zip Code 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. SIGNATURE 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 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 11. ☐ Addition ☐ Delete TITLE TITLE NAME NAME BOWER, WILLIAM J JR. STREET ADDRESS STREET ADDRESS **3983 NE 167TH STREET** CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 □ Change ☐ Addition ☐ Delete TITLE BOWER, WILLIAM J III NAME STREET ADDRESS STREET ADDRESS 330 NE 152ST STREET CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☐ Change ☐ Addillion TITLE TITLE Delete NAME NAME **BOWER, GARY** STREET ADDRESS **2331 NE 211TH STREET** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33180 ☐ Change ☐ Addition Delete TITLE 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 TITLE ☐ Change Addition TITLE ☐ Delete 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 changed, or on an attachment with an address, with all other like empowered.

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William J. Bower, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: