2001 UNIFORM BUSINESS REPORT (UBR) **FILED** May 02, 2001 8:00 am Secretary of State DOCUMENT # P0100000584 1. Entity Name FRESH SUCCESS, INC. 05-02-2001 90208 011 ***150.00 Principal Place of Business Mailing Address 3331 S. KIRKMAN ROAD #518 3331 S. KIRKMAN ROAD #518 ORLANDO FL 32811 ORLANDO FL 32811 . 755340 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 59-3706739 Not Applicable Zip Country 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 BRADLEY, WAYNE Street Address (P.O. Box Number is Not Acceptable) 3331 S. KIRKMAN ROAD #518 ORLANDO FL 32811 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 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 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE PD ☐ Delete TITLE ☐ Change Addition NAME NAME BRADLEY, WAYNE STREET ADDRESS STREET ADDRESS 3331 S. KIRKMAN ROAD #518 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32811 Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change - ' Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS

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 eath; 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.

STREET ADDRESS CITY-ST-ZIP

Wayne Bradley

4/25/01

(407) 532-0121

Daytime Phone #

CH2E034 (10/00)