FILED Jul 02, 2002 8:00 am 2002 UNIFORM BUSINESS REPORT (UBR) **Secretary of State** DOCUMENT # P01000009253 05-29-2002 90681 038 ***550.00 MORRIS PALMETTO CORPORATION 37322 Principal Place of Business Mailing Address 120 E. PALMETTO PARK ROAD 120 E. PALMETTO PARK ROAD SUITE 425 SUITE 425 BOCA RATON FL 33432 BOCA RATON FL 33432 SE MIZNOR BLUD. DO NOT WRITE IN THIS SPACE Applied For Zip 3 3432 \$8.75 Additional MORRIS, WILLIAM E Street Address (P.O. Box Number is Not Acceptable) 120 E. PALMETTO PARK ROAD SUITE 425 __ ... Zip Code **BOCA RATON FL 33432** 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 After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 115 (9/01) TITLE Change Delete TITLE NAME NAME MORRIS, WILLIAM E 99 SE MIZNET BLUDG. CR2E034 (STREET ADORESS 120 E. PALMETTO PARK ROAD #425 STREET ADDRESS BOCA Raton, PL 33432 CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL 33432** ☐ Change ☐ Delete TOTLE ☐ Addition TITLE NAME MORRIS, SCOTT 99 SE MIZNOT Blud. 120 E. PALMETTO PARK ROAD #425 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Boca-Paton F1-33432 CITY-ST-ZIP **BOCA RATON FL 33432** __ Change ☐ Addition □ Delete TITLE TIRE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition C Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -Change ☐ Addition TOTLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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.