2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jun 20, 2002 8:00 am Secretary of State

DOCUMENT # P0100017760 1. Entity Name AEGIS ENTERPRISES, INC.					05-19-2002 90054 037 ***150.00			
Principal Place of Business Mailing Address 2610 WEDGEWOOD PLAZA DRIVE 2610 WEDGEWOOD PLAZA WEST PALM BEACH FL 33404 WEST PALM BEACH FL 33				I				
2. Principal P	lace of Business		Mailing Address) 00 102 102 1 100 1 120 1	DISH CON 1881
249 Royal Palm 5.7.13 Elmu Sulle Ant # etc. Sulle, Apt. #, etc.				noog ?	× +	DO NOT WRITE IN	THIS SPACE	
Sulte, Apt. Ste-301			Soile, Apr. #, etc.			55 1151 111115 111		
City & State			City & State	D 1	C1 %	FEI Number		plied For
Palm Be	ach, FL		Vest Yalm	· Beach	7r1 8	12-0548432		t Applicable
Zip	Country		^{zp} 33407	Country U	5.	Certificate of Status Desired	\$8.75 Add	titional d
<u> 33480—</u>	6. Name and Address of	of Current Regi	stered Agent	1	7.	Name and Address of New Registr	ered Agent	
	\$			Name.	C/2-2-	TT ASPITE	,	-
SCOTT, A	EGIS			Street A	ddross (P.O.)	Box Number is Not Acceptable)	≥	
2610 WEI	OGEWOOD PLAZA DRIVE			Silect		DOX HORIZON IS THAT HOSE PRODUCT,		
	LM BEACH FL 33404			249	9. Rova	1 Palm (Nax	Ste-3	361
		•		City				
					<u>alm</u>	l S e な c 人 gent, or both, in the State of Florida.	7330	180
	Signature, typed or printed name of recognition is eligible to satisfy its	Intangible		Registered Agent signal FEE IS \$150.	.00	10. Election Campaign Financin		O May Be
	requirement and elects to do ria on back)	so.	Make Check Payabl			Trust Fund Contribution.	⊔ Added	I to Fees
11.	OFFIC	ERS AND DIRE	CTORS	12.	ΑC	DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	
TITLE NAME	PSD SCOTT, AEGIS 2610 WEDGEWOOD PL	AZA DDIVE	☐ Delete	TITLE NAME STREET ADDRESS	PS DT SCOT	TAegi's Elmwood St.	<u> </u> Change	Addition
STREET ADDRESS CITY-ST-ZIP	WEST PALM BEACH FI			CITY-ST-ZIP	West	Palm Beach, Fl	33407)
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NAME Street address				STREET ADDRESS				
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U UT 14			Celete	TITLE	 		☐ Change	Addition

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.

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP