2002 UNIFORM BUSINESS REPORT (UBR)

May 15, 2002 8:00 am Secretary of State P01000031094 DOCUMENT # 1. Entity Name 05-15-2002 90143 042 ***150 00 STAGG ENTERPRISES, INC. Principal Place of Business Mailing Address 1541 SPRUCE ROAD 1541 SPRUCE ROAD MELBOURNE FL 32935 MELBOURNE FL 32935 2. Principal Place of Business 3. Mailing Address 1541 Spruce Rd 1541 Sprice Rd Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State Applied For Melbourne Melbourne, 593707220 Zip Country \$8.75 Additional 5. Certificate of Status Desired 32935 32935 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Enterprises, Inc ALRON ENTERPRISES, INC. (P.O. Box Number is Not Acceptable) 390 NARRAGANSETT STREET NE PALM BAY FL 32907 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. (NOTE: Registered Agent signature required when reinstating) 10. Election Campaign Financing 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so... -After May 1, 2002-Fee will be \$550.00 --(See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Owner CR2E034 (9/01) ☐ Addition ☐ Change Chan Stage STAGG, CHAN NAME 1541 Spense Rd. STREET ADDRESS 1541 SPRUCE ROAD STREET ADDRESS CITY-ST-7IP MELBOURNE FL 32935 CITY-ST-ZIP Melbourne Fl. 32935 TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition 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.

FILED

SIGNATURE: