FILED Jul 16, 2002 8:00 am 2002 UNIFORM BUSINESS REPORT (UBR) **Secrétary of State** P01000052527 DOCUMENT # 1. Entity Name 07-16-2002 90346 022 ***150.00 ONE TRUST SECURITIES, INC. Mailing Address Principal Place of Business 11150 OKEECHOBEE BLVD. 11150 OKEECHOBEE BLVD. SUITE A ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411 2. Principal Place of Business 2200 S PRINGDALE 3. Mailing Address PRINGDALE BLVD DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FELNumber // 04434 Applied For SPRINES. Not Applicable \$8.75 Additional 5. Certificate of Status Desired S A 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name D' AQUINO, LOUIS Street Address (P.O. Box Number is Not Acceptable) 2200 SPRINGDALE BLVD., #204 PALM SPRINGS FL 33461 Zip Code City its this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations ed or printed name of registered agent and title if appl (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 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 September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (4/02) Change ☐ Addition Delete TITLE D' AQUINO, LOUIS NAME NAME 2200 SPRINGDALE BLVD., #204 STREET ADDRESS STREET ADDRESS PALM SPRINGS FL 33461 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change | ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied of the 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 trossee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Daytime Phone #

changed, or on an attachmen

SIGNATURE

P0100005050 # P0100005050

Louis D'Aquino
One Trust Securities
2200 Springdale Blvd.
Unit # L-204
Palm Springs, Florida 33461
(561)963-6326

July 2, 2002

F E I NUMBER....65-1104434

To: Department of State Florida

I am enclosing a check for \$150.00for my filing fee as I DID NOT RECEIVE ANY PAPERWORK FOR FILING EARLIER THIS YEAR OF 2002.

I called your office on July 2, 2002 and explained this and was instructed to send a check for \$150.00 accompanied by this letter explaining why the check was not sent to you earlier.

Signed,

Louis D'Aquino