## **2003 FOR PROFIT CORPORATION**

SIGNATURE:

Stof PALKETTO AVENUE COCOA FL 2227  2. Periodical Place of Business  Suite, Apt. #, otic  City A. State  City City A. State  City City City A. State  City City City A. State  City City City City Blate  City City City Blate  City City City City Blate  City City	UN	IIFORM BUSINE	ESS REPOR	RT (UBR)	Wiay 05, 200		
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Side Apt. R. del.  2. Principal Place of Business  Suite, Apt. R. del.  Suite, Apt. R. del.  City A. State  City City City City City City City City	ANLINO	AN I NEOLOIGIN METAEWON	110, 1110.		/		
2. Principal Place of Business  Suite. Apr. #, etc.   GAECK HERE IF MAKING CHANGES  Suite. Apr. #, etc.   GAECK HERE IF MAKING CHANGES  City & State   Country   Zig   Country   S. Certificate of Status Desired   Sp. 3728106   Applied Sp. 4758 Additional Fee Required  4. Name and Address of Current Registered Agent   7. Name and Address of New Registered Agent   Name   Na	5101 PALMETTO AVENUE		5101 PALMETTO AVENU	JE	11036338		
Sults, Apt. #, etc.   CheCK HERE IF MAKING CHANGES  Cry & State   Cry & State   Cry & State   4. FEI Number   59-9728106   Applied For Nova Applied  Zip   Country   Zip   Country   State   Country   S. Certificate of Status Desired   S. 75 Applied For Registered  6. Name and Address of Current Registered Agent   7. Name and Address of New Registered Agent    WARREN, WHITNEY   Sheet Address (P.O. Box Number is Nex Acceptable)    Store Andrew (P.O. Box Number is Nex Acceptable)    Store Andrew (P.O. Box Number is Nex Acceptable)    Store Andrew (P.O. Box Number is Nex Acceptable)    FL   Zip Code    A. The above nemes entry submits this statement for the purpose of charging is registered office or registered agent. or both in the State of Florids. I am femiliar with, and acceptable    Signature   Color   FL   Zip Code    After May 1, 2005 Fee with be \$550.00   Acceptable    FILE NOW!!! FEE IS \$150.00    FILE NOW!! FEE IS \$150.00    FILE NOW!!! FEE IS \$150.00    FILE NOW!! FEE IS \$150.00    FILE NOW!! F	0000MTE	,	0000N 1E 32327		) (1.00) (1.00) (1.00) (1.00) (1.00) (1.00) (1.00) (1.00) (1.00) (1.00)	I	
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Secretary   Secr	Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
Secret Address of Status Desired   Set 37.5 Acadisonal Fee Anaptival   Set Address of New Registered Agent   Street Address of New Registered Agent   Name and Address of New Registered Agent   Name   Nam	City & State		City & State		4. FEI Number 59-3728106	Applied For Not Applicable	
### Cocco ### Co	Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional	
WARREN, WHITNEY Store Address (P.O. Box Number is Not Acceptable)  CICKY  FL 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 Fiorida. I am farmiliar with, and ecot the obligations of registered agent with a facilitative.  FILE NOWILI FEE. IS \$150.00.  After May 1, 2003 Fee will be \$550.00.  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  THE NOWE STRET ADDRESS  CITY-51-2P  UNAREN, WHITNEY  DARREN, WHITNEY  DOWN BIRET ADDRESS  CITY-51-2P  THE NOW STRET ADDRESS  CITY-51-2P  THUSVILLE FL 32780  Delde  THE NOW.  Delde  THE NOW.  STRET ADDRESS  CITY-51-2P  THUSVILLE FL 32780  Delde  THE NOW.  STRET ADDRESS  CITY-51-2P  THUSVILLE FL 32780  Delde  THE NOW.  STRET ADDRESS  CITY-51-2P  THUSVILLE FL 32780  Delde  THE NOW.  STRET ADDRESS  CITY-51-2P  THUSVILLE FL 32780  Delde  THE NOW.  STRET ADDRESS  CITY-51-2P  THUSVILLE FL 32780  Delde  THE NOW.  STRET ADDRESS  CITY-51-2P  THUSVILLE FL 32780  Delde  THE NOW.  STRET ADDRESS  CITY-51-2P  THE		6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered		
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8. The above named ontity submits this statement for the purpose of changing its registered agent, or both. In the State of Florida. I am familiar with, and according to the obligations of registered agent, or both. In the State of Florida. I am familiar with, and according to the obligations of registered agent, or both. In the State of Florida. I am familiar with, and according to the obligations of registered agent, or both. In the State of Florida. I am familiar with, and according to the obligations of registered agent, or both. In the State of Florida. I am familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary significant view floridary and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with, and according to the floridary with a familiar with a famili				Street Address	Street Address (P.O. Box Number is Not Acceptable)		
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SIGNATURE    Signature typed or printing name of registered appet and lite of application.   (NOTE Registered Agent signature required when remasking)   DATE			r the purpose of changing it	s registered office or registe	ered agent, or both, in the State of Florida. I an	n familiar with, and accept	
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After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10.	·	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered Agent signature require	ed when reinstating) DATE		
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