FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 21, 2002 8:00 am Secretary of State DOCUMENT # P01000081585 1. Entity Name 04-21-2002 90843 021 ***150.00 DOLL INDUSTRIES, INC. Principal Place of Business Mailing Address 3203 GENERAL ELECTRIC RD., UNIT 12 3203 GENERAL ELECTRIC RD., UNIT 12 PLYMOUTH FL 32768 PLYMOUTH FL 32768 2. Principal Place of Business 3. Mailing Address 32768-110-CO11 20 & O.T mouth Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number 59-3745043 City & State Applied For Not Applicable Zip Country \$8.75 Additional Fee Required -5.. Certificate of Status Desired. -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FREDERICK DOLL, FREDERICK E Street Address (P.O. Box Number is Not Acceptable) 3203 GENERAL ELECTRIC RD., UNIT 12 PLYMOUTH FL 32768 City Zip Code 00 PKa 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition NAME NAME DOLL, FREDERIC E STREET ADDRESS STREET ADDRESS 3203 GENERAL ELECTRIC RD., UNIT 12 CITY-ST-ZIP CITY-ST-ZIP PLYMOUTH FL 32768 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME DOLL, BEVERLY G STREET ADDRESS STREET ADDRESS 3203 GENERAL ELECTRIC RD., UNIT 12 CITY-ST-ZIP CITY-ST-ZIP PLYMOUTH FL 32768 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME DOLL, KELLI K STREET ADDRESS STREET ADDRESS 3203 GENERAL ELECTRIC RD., UNIT 12 CITY-ST-ZIP CITY-ST-ZIP --PLYMOUTH FL 32768 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME

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 CITY-ST-ZIP

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR