2003 FOR PROFIT CORPORATION

FILED Mar 19, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR P01000088600 DOCUMENT # 1. Entity Name 03-19-2003 90163 024 ***150.00 OCEAN ONE REAL ESTATE GROUP, INC. Principal Place of Business Mailing Address 980 N FEDERAL WY STE 434 980 N FEDERAL WY STE 434 **BOCA RATON FL 33432 BOCA RATON FL 33432** 2. Principal Place of Business 401 W. Suite, Apt. #, etc. Suite, Apt. #, etc. # 200 ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For 65-1140018 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YEFFETH, ALLEÑ J Street Address (P.O. Box Number is Not Acceptable) 2429 ZEDER AVE DELRAY BEACH FL:33444 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. I am familiar with, the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition YEFFETH, ALLEN NAME NAME 2429 ZEDER AVE STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33444** CITY-ST-ZIP CITY-ST-ZIP 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-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 eath; 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 10 or Block 11 if changed, or on an attachment with an address , with all other like empowered

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CR2E034 (10/02)