2003 FOR PROFIT CORPORATION

Apr 28, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P01000090065 DOCUMENT # 1. Entity Name JEREMIAH'S FLORIDA, INC. Principal Place of Business Mailing Address 210 S. PINELLAS AVE. 210 S. PINELLAS AVE. **STE 130** STE 130 **TARPON SPRINGS FL 34689** TARPON SPRINGS FL 34689 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State City & State - 59-3744903 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SELTZER, PURITA Street Address (P.O. Box Number is Not Acceptable) 2791 VALENCIA LANE, W PALM HARBOR FL 34684 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00. 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Addition CR2E034 (10/02 TITLE ☐ Delete HERNANDEZ, EMMANUEL D NAME NAME 1015 MCTAVISH WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34684 CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME SELTZER, WILLIAM B NAME 2791_VALENCIA_LANE, W STREET ADDRESS STREET ADDRESS CITY-ST-7IP PALM HARBOR FL 34684 CITY-ST-ZIP PRESIDEN (Change Addition TITLE SD ☐ Delete TITLE PURITA SELTZEN NAME SELTZER, PURITA B NAME 2791 VALENCIA LU W STREET ADDRESS STREET ADDRESS 2791 VALENCIA LANE, W PACH IHArbor CITY-ST-ZIP

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

TITLE

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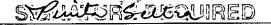
NAME

PALM HARBOR FL 34684

MURRAY, JUANITA

1015 MCTAVISH WAY

PALM HARBOR FL 34684



☐ Delete

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Daytime Phone #

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FILED