FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 15, 2002 8:00 am Secretary of State P01000091605 DOCUMENT # 1. Entity Name SUPERIOR DISPLAY & EXHIBIT, INC. 07-15-2002 90191 003 ***150.00 Principal Place of Business Mailing Address 631 WASHBURN RD. STE 28 631 WASHBURN RD, STE 28 MELBOURNE FL 32934 MELBOURNE FL 32934 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEi Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REILLY, ROBERT J Street Address (P.O. Box Number is Not Acceptable) 631 WASHBURN RD, STE 28 MELBOURNE FL 32934 City 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 Florida. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition REILLY, ROBERT J NAME NAME STREET ADDRESS 800 PINE ST STREET ADDRESS CITY-ST-ZIP **MELBOURNE BCH FL 32951** CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME REILLY, MARGARET A NAME STREET ADDRESS 800 PINE ST STREET ADDRESS MELBOURNE BCH FL 32951 CITY-ST-ZIP . CITY-ST-ZIP TITLE Delete ☐ Addition ☐ Change 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 TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 of 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 outrustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF

☐ Delete

☐ Change

☐ Addition

Attachment # P01000091605



DISPLAYS & EXHIBITS

July 9, 2002

Florida Department of State Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, Florida 32302-1500

To Whom It May Concern:

I am writing this letter to inform you we did not receive prior notice of the UNIFORM BUSINESS REPORT for 2002.

We received our first notice on July 3, 2002. Therefore I would like the penalty for late Filing to be waived.

I am enclosing a check for \$150.00 for the filing fee.

Sincerely,

Robert J. Reilly - President

Superior Display & Exhibit Inc.