FILED
Apr 23, 2003 8:00 am
Secretary of State
04-23-2003 90208 002 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000103644

1. Entity Name: VINELAND VENTURES INC

DO NOT WRITE IN THIS SPACE

70047313

2. Principal Place of Business	3. Mailing Address
3500 WATERCREST PL.	3500 WATERCREST PL.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO FL	City & State: ORLANDO FL
Zip: 32835 Country: U.S.A.	Zip: 32835 Country: U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3751183 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: YOOSOOF E. GARDEE

Street Address (P.O. Box Number is Not Acceptable): 3500 WATERCREST PLACE

City: ORLANDO FL Zip Code: 32835

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] YOOSOOF E. GARDEE V.P. — APRIL 21/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	TITLE	
NAME	RASHIDA GARDEE	NAME	
STREET ADDRESS	3500 WATERCREST PL	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32835	CITY-ST-ZIP	
TITLE	V. PRESIDENT	TITLE	
NAME	YOOSOOF E. GARDEE	NAME	
STREET ADDRESS	3500 WATERCREST PL	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32835	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] YOOSOOF E. GARDEE VP. APRIL 20/03 4074777732
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #