2002 UNIFORM BUSINESS REPORT (UBR)

Aug 04, 2002 8:00 am Secretary of State **DOCUMENT#** P01000104614 07-17-2002 90129 016 ***550.00 1. Entity Name JVH INVESTMENTS, INC. Principal Place of Business Mailing Address 13253 EMERALD ACRES AVE. 13253 EMERALD ACRES AVE. 40506 DOVER FL 33527 DOVER FL 33527 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 59-3755826 Zip Country Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent " Name HARWELL, JAMES A JR 13253 EMERALD ACRES AVE. Street Address (P.O. Box Number is Not Acceptable) DOVER FL 33527 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 (NOTE: Registered Agent signature required when rainstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 10. Election Campaign Financing \$5.00 May Be (See criteria on back) Make Check Payable to Department of State Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE President James A Hammell IR ☐ Delete TITLE NAME □ Addition NAME STREET ADDRESS 13253 Enemld Acres Are STREET ADDRESS CITY-ST-ZIP Dover F1. 33527 CITY-ST-ZIP TITLE Treasurer Valerie Harmell Delete NAME ☐ Change ☐ Addition NAME 13253 Emerald Aones Ave Dover Fl. 33527 STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP TITLE D Delete TITLE NAME ··· * 💽 Change - - 🛄 Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7iP TITLE ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIA CITY-ST-ZIP ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CiTY-ST-7IP 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 or supplemental report is true and cacurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

QUames A Harwell jr.

FILED