2002 UNIFORM BUSINESS REPORT (UBR)

May 15, 2002 8:00 am & Secretary of State P01000110009 DOCUMENT # 1. Entity Name 05-15-2002 90027 023 ***150.00 L.S.K. GLOBAL PRODUCTS & SERVICES, INC. Principal Place of Business Mailing Address 11110 W OAKLAND PARK BOULEVARD 11110 W OAKLAND PARK BOULEVARD #324 #324 SUNRISE FL 33351 SUNRISE FL 33351 2. Principal Place of Business 3. Mailing Address Same SAME AS BOVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3756833 Not Applicable Zip Country Zip 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 Name SHELDON RAMKISSOON, LYNDON Street Address (P.O. Box Number is Not Acceptable) 11110 W OAKLAND PARK BOULEVARD 11110 W. OAKLAND PARK BOULEVARD #324 #324 SUNRISE FL 33351 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 HELDON SIGNATURE X nature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE P.V. IS. SHELDON RAMKISSOOM. ID Change A TITLE (9/01)☐ Delete RAMKISSOON, SHELDON NAME IIIOW. DAKLAND PARK BLUD. #321 11110 W OAKLAND PARK BLVD., #324 STREET ADDRESS STREET ADDRESS SUNRISE FL 33351 CITY-ST-ZIP CITY-ST-ZIP Sunris*e* Delete TITLE Change ☐ Addition RAMKISSOON, KIVANA NAME NAME 11110 W OAKLAND PARK BLVD., #324 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNRISE FL 33351 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition RAMKISSOON, LYNDON NAME 11110 W OAKLAND PARK BLVD., #324 STREET ADDRESS STREET ADDRESS SUNRISE FL 33351 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED