2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 06, 2002 8:00 am Secretary of State DOCUMENT # P01000111256 1. Entity Name 05-06-2002 90001 020 ***150 00 SPIER ENTERPRISES, INC. Principal Place of Business Mailing Address 3781 NW 78TH LANE 3781 NW 78TH LANE CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address 4976 W. ATLANTIC Suite, Apt. #, etc. Suite, Apt. #; etc. DO NOT WRITE IN THIS SPACE ≃City:&.State= 4. FEl:Number City & State Applied For MargaTe 65-1155 Not Applicable Zip 3*3063* Country Zip Country \$8.75 Additional 5. Certificate of Status Desired TÎ USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145 3306.5 8. The above named entity submits this statement for the purpose of changing its registered office or registered SIGNATURE and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TIELE ☐ Delete TITLE ☐ Addition NAME CUNNINGHAM, REBECCAH A NAME STREET ADDRESS 3781 NW 78TH LANE STREET ADDRESS CITY-ST-ZIP **CORAL SPRINGS FL 33065** CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME NAME CUNNINGHAM, REBECCAH A STREET ADDRESS 3781 NW 78TH LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-7)P **CORAL SPRINGS FL 33065** TITLE TÎTLE ☐ Addition VSTD ☐ Delete Change NAME SPIER, FRANK S NAME STREET ADDRESS STREET ADDRESS **3781 NW 78TH LANE** CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 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.

FILED