FILED 2002 UNIFORM BUSINESS REPORT (UBR) Sep 23, 2002 8:00 am Secretary of State P01000120893 DOCUMENT # 1. Entity Name SUPPLY CENTRAL U.S.A., INC. 09-23-2002 90196 044 ***150.00 Principal Place of Business Mailing Address 1041 PARK AVE. 1041 PARK AVE. **BOCA RATON FL 33486 BOCA RATON FL 33486** 2. Principal Place of Business 3. Mailing Address 1041 Ave Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For ∇U bola Katon 65115857 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent hae GLICKMAN, ALYSA J 1041 PARK AVE. **BOCA RATON FL 33486** ^{Zip Code} 33486 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. FILE NOW!IF FEE IS \$150.00 After May II, 2002 Fee will be \$550.00 Make Check Payable to Department of State 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. Trust Fund Contribution. (See criteria on back) Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/01) ☐ Change NAME GLICKMAN, ALYSA J NAME STREET ADDRESS 1041 PARK AVE. STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33486** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME GLICKMAN, MICHAEL J STREET ADDRESS STREET ADDRESS 1041 PARK AVE. CITY-ST-7IP CITY-ST-ZIP BOCA RATON FL 33486 TITLE. Delete -TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition 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 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.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hachment 873505 # p01000/20893

September 20, 2002

Division Of Corporations Uniform Business Report Filings P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

My name is Michael Glickman with Supply Central U.S.A., Inc., located in Boca Raton.

Yesterday, I spoke with your offices and they instructed me to write this letter.

On May 25th, I sent the 2002 Uniform Business Report along with my check for \$150. Recently I was going through all of our paper work and found that there was no record of the check having been cashed. When I called your office they verified that the document along with my check had never been received. In addition, our company did not receive a delinquency notice.

Your office said that I should resend the information with another check for the \$150, and ask that the late fee be waived. Which is what I have now done.

Thank you for your consideration.

Most sincerely,

Michael Glickman

Supply Central U.S.A., Inc.