2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

P02000008455 **DOCUMENT #** 03 OCT -2 PH 3:21 1. Entity Name VIBRANT, INC. CRETATIY OF STATE LAHASSEE FLORIDA Principal Place of Business Mailing Address 17731 N.W. 28TH COURT 17731 N.W. 28TH COURT MIAMI FL 33056 MIAMI FL 33056 3. Mailing Address 838 NW 2. Principal Place of Business eard street <u>NM 183</u> Suite, Apt. #, etc CHECK HERE IF MAKING CHANGES 4. FEI Number City & State Applied For 7L Miam. Miami Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Dade Fee Required -Dade 6.≂Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Diahann Harns RAPID CORPORATE SUPPLIES, INC. Street Address (P.O. Box Number is Not Acceptable) 17100 N.E. 19TH AVENUE NORTH MIAMI BEACH FL 33162 Zip Code 169 <u>Miani</u> 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 (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 Change TITLE ☐ Delete TITLE Harris, Dia Hann Denise HARRIS, DIABANN DENISE NAME NAME STREET ADDRESS 17731 N.W. 28TH COURT STREET ADDRESS 838 NW183 CITY-ST-ZIP MIAMI FL 33056 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS 800023488478 CITY-ST-ZIP CITY-ST-ZIP -01047---017 TITLE Delete TIDE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZIP CITY-ST-7IP TITLE Delete TITLE Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

210/2

9/18/2003-90032-01/1/\$550:00-\$550.00