2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 90377 027 ***150.00

DOCUMENT # P02000020072

1. Entity Name
DE GRAAF FINE ART COMPANY

Principal Place of Business
1208 MARINE WAY, G-7
NORTH PALM BEACH FL 33408

Mailing Address
1208 MARINE WAY, G-7
NORTH PALM BEACH FL 33408

2. Principal Place of Business: 195 CITY PLACE
Suite, Apt. #, etc.: 477 S. ROSEMARY AVE
City & State: WEST PALM BEACH, FL
Zip: 33401 Country: USA

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number: 75-3002169 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WHITMIRE, DRENNEN L JR, ESQ
450 ROYAL PALM WAY, 6TH FL
PALM BEACH FL 33480

7. Name and Address of New Registered Agent
Name: DAN DEGRAAF
Street Address (P.O. Box Number is Not Acceptable): 1208 MARINE WAY G-7
City: NORTH PALM BEACH FL Zip Code: 33408

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: TOM BALBO 4-30-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

FILE NOW!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D ☐ Delete
NAME	DE GRAAF, DANIEL LEE
STREET ADDRESS	1208 MARINE WAY, G-7
CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	D ☐ Delete
NAME	BALBO, THOMAS E
STREET ADDRESS	1208 MARINE WAY, G-7
CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E034 (10/02)

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.

SIGNATURE: TOM E. BALBO 4-30-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #