FILED

2003 FOR PROFIT CORPORATION

Apr 24, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P02000093744 DOCUMENT # 04-24-2003 90194 001 ***150.00 1. Entity Name BONDWEL, INC. Principal Place of Business Mailing Address 23227 FREEDOM AVE STE 3 23227 FREEDOM AVE STE 3 CHARLOTTE HARBOR FL 33980 CHARLOTTE HARBOR FL 33980 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 35-218 5037 City & State City & State Applied For 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 LOEWE, WALTER Street Address (P.O. Box Number is Not Acceptable) 23227 FREEDOM AVE STE 3 **CHARLOTTE HARBOR FL 33980** City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (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. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition LOEWE, WALTER L NAME NAME 23227 FREEDOM AVE STE 3 STREET ADDRESS STREET ADDRESS **CHARLOTTE HARBOR FL 33980** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE .

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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. SIGNA

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