2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State
04-17-2003 90646 003 ***150.00

DOCUMENT # P02000096505

1. Entity Name
2VHL HOLDINGS, INC.

Principal Place of Business	Mailing Address
3311 S FORBES RD DOVER FL 33527	PO BOX 187 SYDNEY FL 33587

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
6311 BURTS RD. Suite, Apt. #, etc.	6311 BURTS Rd Suite, Apt. #, etc.
City & State: TAMPA FL	City & State: TAMPA, FL
Zip: 33619 Country: USA	Zip: 33619 Country: USA

4. FEI Number: 11-3651950 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VARNADORE, AL 3311 S FORBES RD DOVER FL 33527	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: AL Varnadore AL VARNADORE 4-15-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VARNADORE, AL 3311 S FORBES RD DOVER FL 33527	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUTTO, TODD 201 ESSARY ST AUBURNDALE FL 33823	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VARNADORE, DEAN 3216 S FORBES RD DOVER FL 33527	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAY, FRED 2818 BRYAN RD BRANDON FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: AL Varnadore AL VARNADORE 4-15-03 813/677-7223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #