FILED

## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Apr 29, 2003 8:00 am Secretary of State P02000120522 DOCUMENT # 04-29-2003 90072 003 \*\*\*150.00 BUDGET BINGO RENTALS, INC. Principal Place of Business Mailing Address P. O. BOX 606 P. O. BOX 606 MAYO FL 32066 MAYO FL 32066 2. Principal Place of Business 3. Mailing Address 2050 S, JEFFERSON Suite, Apt. #, etc. Suite, Apt. #, etc. THECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 51-0441 Not Applicable ENRY Country Zip Country \$8.75 Additional 5. Certificate of Status Desired AYIOR Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NORTHERN FLORIDA INVESTMENTS, INC. Street Address (P.O. Box Number is Not Acceptable) RT. 2 BOX 2500 #12 WILLOW LANE 22 WEEPING WILLOW **MAYO FL 32066** 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 RICHARD E. MAXLER SIGNATURE 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 PSDT Change ☐ Addition TITLE Delete MARLEN, SR. Richand NAME MARLER, RICHARD E SR. NAME 122 WEEPING WILLOW CANE STREET ADDRESS RT. 2 BOX 2500 #12 WILLOW LANE STREET ADDRESS CITY-ST-ZIP MAYO FL 32066 CITY-ST-ZIP MAVO, FL. 32066 Delete ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP C Delete ☐ Addition TITLE Change STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition 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 tystel 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.