FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91516 020 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

10089981

DOCUMENT # P02000123249

1. Entity Name
PRICKLY PEARS, INC.

Principal Place of Business	Mailing Address
3503 HIGHWAY 98 MEXICO BEACH, FL 32410	101 S. 36TH STREET MEXICO BEACH, FL 32456

2. Principal Place of Business	3. Mailing Address
101 S. 36th ST	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MEXICO BEACH, FL	City & State
Zip: 32456 Country: USA	Zip Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 51-0443393 ☐ 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
LOWERY, DOLORES 7666 ALABAMA AVENUE ST. JOE BEACH, FL 32456	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: Dolores Lowery 4/23/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when eliminating) 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 LOWERY, DOLORES 7666 ALABAMA AVENUE ST. JOE BEACH, FL 32456	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOWERY, JAMES H JR. 7666 ALABAMA AVENUE ST. JOE BEACH, FL 32456	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: Dolores Lowery 4/23/03 850-648-1115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #