2003 FOR PROFIT CORPORATION

FILED May 07, 2003 8:00 am Secretary of State

UNIFORM BUSINESS REPORT (UBR

04-18-2003 90145 024 ***150.00 P02000123508 **DOCUMENT #** 1. Entity Name HOLLYWOOD SPIRITS, INC. Principal Place of Business Mailing Address 55038452 4608 DELWOOD PARK BLVD 4608 DELWOOD PARK BLVD PANAMA CITY BEACH FL 32408 PANAMA CITY BEACH FL 32408 Mailing Address Suite, Apt. #, etc. NO CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For Not Applicable \$8.75 Additional SA 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARNETT, BRETT Street Address (P.O. Box Number is Not Acceptable) 3 4608 DELWOOD PARK BLVD PANAMA CITY BEACH FL 32408 City 8. The above named Intity 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 g SIGNATURE (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 OFFICERS AND DIRECTORS

President 10. 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition CH2E034 (10/02) TITLE ☐ Oelete TITLE Brett Barnett 440F Delwood Pr Blvd NAME NAME STREET ADDRESS STREET ADDRESS hama City Boh £ 32408 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition NAME NAME 3 Tolip Poplar Dr. STREET ADDRESS STREET ADDRESS Burmingham Ar 35244 Sec. Measurer Nataria Baynett CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition 4609 Delwood PR BIVE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SY-7IP Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP . Doelete TITLE ☐ Addition NAME NAME C STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME 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 of trustee empowered to execute this report as equired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in

SIGNATURE: