FILED

2003 FOR PROFIT CORPORATION

May 05, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR) Secretary of State** P02000123511 DOCUMENT # 05-05-2003 91146 033 ***150.00 1. Entity Name READY REAL ESTATE INVESTMENTS, INC. Principal Place of Business Mailing Address 2077 FIRST ST STE 208 2077 FIRST ST STE 208 FT MYERS FL 33901 FT MYERS FL 33901 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For Not Applicable Country Zip-\$8.75 Additional 5. Certificate of Status Desired Fee Required ddress of Current Registered Agent 7. Name and Address of New Registered Agent DALTROFF, F. ANDREW Street Address (P.O. Box Number is Not Acceptable) 2077 FIRST ST STE 208 FT MYERS FL 33901 City 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. DAUTROFF SIGNATURE tle if applicable 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. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. - PRESIDENT TITLE ☐ Delete TITLE ☐ Change Addition DALTROFF, F. ANDREW NAME NAME 2077 FIRST ST STE 208 STREET ADDRESS STREET ADDRESS FT MYERS FL 33901 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP " isec . TESASURE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 a graddress with all other the empowered.

SIGNATURE:

FURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR