2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT**

SECRETARY OF STATE DIVISION OF CORPORATIONS P02000128137 **DOCUMENT #** 1. Entity Name 03 OCT -/3 AM 8: 00 FISH WHISTLE INVESTMENTS, INC. Principal Place of Business Mailing Address 3110 1ST AVE. NORTH 3110 1ST AVE. NORTH ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. TH CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FLOYD, JAMES E JR. Street Address (P.O. Box Number is Not Acceptable) 3110 1ST AVE. NORTH ST. PETERSBURG FL 33713 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 age SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, type FILE NOW! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition CR2E034 (4/03) Change TITLE Delete TITLE NAME NAME es E Floyd JR STREET-ADDRESS STREET, ADDRESS, · Ave N CITY-ST-ZIP CITY-ST-7IP つょろ Change ☐ Addition ☐ Delete TITL F TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE □.Change ☐ Addition TITLE NAME NAME

STREET ADDRESS

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 is changed, or on an attachment with an address, with all other tips empowered.

STREET ADDRESS

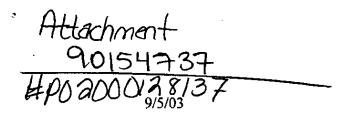
CITY-ST-ZIP

Date

accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

09-08-2003 90134 014 *** 150.00

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Florida Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahasse, Fl 32302-1500

Dear Sir or Madam;

Enclosed you will find the UBR for Fish Whistle Investments, Inc. and payment in the amount of \$150.00.

I respectfully request that you waive the late filing fee. I did not receive the original notice.

Thank you for your assistance in this matter.

Sincerely,

James E. Floyd Jr.

President

Fish Whistle Investments, Inc.

3110 1st Avenue North

St. Petersburg, Florida 33713