.003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

P18206 DOCUMENT

1. Entity Name



Apr 11, 2003 8:00 am Secretary of State

04-11-2003 90075 048 ***150.00

STOLTZ REALTY CO. OF FLORIDA, INC. Principal Place of Business Mailing Address 301 YAMATO RD. #3101 301 YAMATO RD, #3101 **BOCA RATON FL 33431** BOCA RATON FL 33431 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. TI CHECK HERE IF MAKING CHANGES City & State City & State Applied For 51-0307462 Not Applicable Zip Country Zip Country \$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 MORRIS L STOLTZ II Street Address (P.O. Box Number is Not Acceptable) 321 YAMATO RD STE 3101 BOCA RATON FL 33431 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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 Addition Addition TITLE ☐ Delete A Archie Stoltz II NAME STOLTZ, MORRIS LEWIS, II NAME 301 Yamatord Ste 3101 301 YAMATO RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33431** CITY-ST-ZIP Boca Raton, Fl 33431 TITLE ☐ Delete TITLE ☐ Change Addition Jason Carros NAME MITCHELL, ROBERT R. NAME Stc-3101 301 Yama to Rd STREET ADDRESS STREET ADDRESS 7000 W. PALMETTO PARK, STE 109 CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP Boca Raton, FI TITLE ☐ Delete TITLE ☐ Change 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-ZIP TITLE ☐ Delete TITLE Change Addition 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-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 if with all other like empow changed, or on an attachment with an address,

SIGNATURE:

4/3/03 561-998