2000 UNIFORM BUSINESS REPORT (UBR) FILED Jul 14, 2000 8:00 am Secretary of State DOCUMENT # P22784 1. Entity Name BREEHNE CORPORATION 07-14-2000 90002 043 ***550.00 Mailing Address Principal Place of Business 883 VANDERBILT BEACH RD. 883 VANDERBILT BEACH RD. NAPLES FL 34108 NAPLES FL 34108 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 36-2070573 Not Applicable Zip Country 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 BREEHNE, PAUL Street Address (P.O. Box Number is Not Acceptable) 2038 SEAGRAPE NAPLES FL 34110 883 VANDERBILT BEACH 8. The above named entity submits this statement for the purpose of changing 19 registered office or registered agent, or both, in the State of Florida. A ODRESS CHANGE ONLY FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition TITLE ☐ Delete TITLE BREEHME, PAUL 883 VAN DERBILT BEACH BREEHNE, PAUL NAME NAME STREET ADDRESS STREET ADDRESS 2038 SEAGRAP CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34110 BREEHNE SHERPON Thange Addition 883 VANDERBILT BEACH RD. ☐ Delete TITLE TITLE BREEHNE, SHERRON NAME NAME STREET ADDRESS 721 99TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPLES FL 34108 ☐ Addition TITLE TITLE . Delete . . DALTON, PATRICE NAME NAME STREET ADDRESS R.R. 4, BOX 221 STREET ADDRESS CITY-ST-7IP CITY-ST-7IP **GREENVILLE IL 62246** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered.