2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachr

SIGNATURE:

FILED Feb 13, 2001 8:00 am Secretary of State **DOCUMENT # P23447** 1. Entity Name SKOR, INC. 02-13-2001 90074 044 ***150.00 Principal Place of Business Mailing Address 4731 9TH PLACE 4731 9TH PLACE VERO BEACH FL 32966 VERO BEACH FL 32966 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 41-1305716 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 Name KURZWEG, HAROLD E. Street Address (P.O. Box Number is Not Acceptable) 4731 9TH PLACE VERO BEACH FL 32966 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550,00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD Change ☐ Addition TITLE TITLE Delete PD KURZWEG, HAROLD E. NAME NAME Kurzweg, Harold E. STREET ADDRESS 1560 PULITZER RD STREET ADDRESS 4731 - 9th Place Vero Beach, FL 32966 CITY-ST-ZIP CITY-ST-7IP FT. PIERCE FL Delete Change ☐ Addition TITLE TITLE Reinhart, Joyce D. REINHART, JOYCE D. NAME STREET ADDRESS STREET ADDRESS 1560 PULITZER ROAD 4731 - 9th Place CITY-ST-ZIF CITY-ST-ZIP FT. PIERCE:FL ----<u> Vero-Beach,--FL-- 32966- -</u> □ Change ■ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition 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 ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP 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 dustee empowered a execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

ther like empowered

Harold E. Kurzweg - Pres., 2-9-01

561/778-3900