2003 FOR PROFIT CORPORATION

Jan 21, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR P24627 **DOCUMENT #** 1. Entity Name 01-21-2003 90135 049 ***150.00 AMATO ENTERPRISES, INC. Principal Place of Business Mailing Address 1272 W 75TH 1272 W 75TH MARATHON FL 33050 MARATHON FL 33050 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 34-1304939 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMATO, GEORGE 1272 W 75TH Street Address (P.O. Box Number is Not Acceptable) MARATHON FL 33050 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 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 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIT) F ☐ Delete TITLE Change AMATO, GEORGE ☐ Addition NAME NAME STREET ADDRESS 1018 EAST 75TH ST., OCEAN STREET ADDRESS CITY-ST-ZIP MARATHON FL CITY-ST-7IP VST TITLE ☐ Delete TITLE Change NAME Addition amato, Jean NAME STREET ADDRESS 1018 EAST 75TH ST., OCEAN STREET ADDRESS CITY-ST-ZIP MARATHON FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME Addition AMATO, JEAN NAME STREET ADDRESS 1018 EAST 75TH ST., OCEAN STREET ADDRESS CITY-ST-ZIP MARATHON FL - ---- ~ CITY-ST-ZIP TITLE Delete TITLE NAME ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information 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

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

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