2000 UNIFORM BUSINESS REPORT (UBR)

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

TED NAME OF SIGNING OFFICER OR DIRECTOR

\mathtt{FILED} **DOCUMENT # P33443** May 06, 2000 8:00 am Secretary of State JM INTERNATIONAL UN, INC. 05-06-2000 90108 001 *1,650.00 Principal Place of Business Mailing Address 111 NW 12TH AVE 100 NW 12TH AVENUE DEERFIELD BEACH FL 33442-1701 TAX DEPT 14000 DEERFIELD BEACH FL 33442 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number 65-0251783 Not Applicable 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (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, 2000 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition ☐ Delete TITLE BROWN, COLIN W NAME STREET ADDRESS 100 NW 12TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BCH. FL 33442 ☐ Addition ☐ Change Delete TITI F NAME THOMAS, GARY L NAME STREET ADDRESS STREET ADDRESS 100 NW 12TH AVENUE CITY-ST-ZIP DEERFIELD BCH. FL 33442 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE ALLEN, A T NAME NAME 100 NW 12TH AVENUE STREET ADDRESS STREET ADDRESS DEERFIELD BCH. FL 33442 CITY-ST-ZIP CITY-ST-ZIE ☐ Delete Change ☐ Addition WHELAN, JOHN J. NAME NAME 100 NW 12TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BCH. FL 33442 CITY-ST-7IP ☐ Change ☐ Addition TITLE Delete THTLE BROWN, COLIN W NAME NAME 100 NW 12TH AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL CITY-ST-ZIP ☐ Change AS Delete TITLE TITLE BRILLIANT, JON A NAME 100 NW 12TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33442 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