2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P40997 Mar 31, 2000 8:00 am 1. Entity Name **Secretary of State** FJS PROPERTIES, INC. 03-31-2000 90045 006 ***150.00 Principal Place of Business Mailing Address 264 ROUTE 537 EAST 264 ROUTE 537 EAST COLTS NECK NJ 07722 COLTS NECK NJ 07722-1540 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 13-3254175 Not Applicable Zip Country 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 Name LIEBOWITZ, SHELDON Street Address (P.O. Box Number is Not Acceptable) 2600 EAST COMMERCIAL BLVD **SUITE 213** FT. LAUDERDALE FL 33308 Zip Code F۱ 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 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12, ☐ Change Addition CP TITLE ☐ Delete TITLE MAME NAME ALSON, ANDREW C. STREET ADDRESS STREET ADDRESS 264 ROUTE 537 EAST CÎTY-ST-ZIP CITY-ST-7IP COLTS NECK NJ 07722 ☐ Addition ☐ Change **Delete** TITLE TITLE NAME BRENNAN, ROBERT E STREET ADDRESS STREET ADDRESS 264 ROUTE 537 EAST CITY-ST-ZIP CITY-ST-ZIP COLTS NECK NJ 07722 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME BATHGATE, LAWRENCE E II STREET ADDRESS STREET ADDRESS ONE AIRPORT RD. CITY-ST-ZIP CITY-ST-ZIP LAKEWOOD NJ **Delete** Change Addition TITLE TITLE NAME NAME BARNETT, ROGER STREET ADDRESS STREET ADDRESS 264 ROUTE 537 EAST CITY-ST-ZIP CITY-ST-ZIP COLTS NECK NJ 07722 ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME 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.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3/27/00

732.542-9209

Daytime Phone #