2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am P93000045965 Secretary of State DOCUMENT # 1. Entity Name 03-06-2002 90016 001 ***150.00 E.J.P. ENTERPRISES, INC. Principal Place of Business . Mailing Address 7310 S.W. 207TH COURT 7310 S.W. 207TH COURT **DUNNELLON FL 34431** DUNNELLON FL 34431 2. Principal Place of Business 3. Mailing Address 1436 AZTCCA Loop 436 AZTECA DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3187576 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 32162. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PETERSON, EDWARD J Street Address (P.O. Box Number is Not Acceptable) 7310 S.W. 207TH COURT **DUNNELLON FL 34431** Zip Code City FI 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. 2-22*-0* Z printed name of registered agent and title if applicable 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 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (10/6) TITLE TITLE ☐ Addition Delete NAME PETERSON, EDWARD J NAME **CR2E034** STREET ADDRESS 7310 S.W. 207TH COURT STREET ADDRESS CITY-ST-ZIP **DUNNELLON FL 34431** CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 300000 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME NAME =STREFT ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

131 Phereby-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:

MURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED