2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P93000059468 Jan 12, 2000 8:00 am **Secretary of State** DISCOUNT GUNS & PAWN, INC. 01-12-2000 90099 011 ***150.00 Principal Place of Business Mailing Address 1201 S STATE ROAD 7 1201 S STATE ROAD 7 HOLLYWOOD FL 33023-6710 HOLLYWOOD FL 33023 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0432088 Not Applicable Zip Country 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___ BERMAN, JEFFREY Street Address (P.O. Box Number is Not Acceptable) 1201 S. STATE RD 7 HOLLYWOOD FL 33023 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 (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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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 12. 11. Addition ☐ Delete TITLE TITLE NAME NAME GROSS, LEE STREET ADDRESS STREET ADDRESS 1201 S. STATE RD 7 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33023 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME BERMAN, JEFFREY NAME STREET ADDRESS STREET ADDRESS 1201 S. STATE RD 7 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33023 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME GROSS, LEE NAME STREET ADDRESS 1201 S. STATE RD 7 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33023 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME BERMAN, JEFFREY NAME STREET ADDRESS STREET ADDRESS 1201 S. STATE RD. 7 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33023 ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SINGUILE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/00

954-987-1090_

Daytime Phone #