2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT

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Apr 21, 2003 8:00 am Secretary of State 04-21-2003 90516 037 ***158.75 1. Entity Name CENTRAL HOLDINGS, INC. Principal Place of Business Mailing Address *********** 300 LOCKHART MILL RD 300 LOCKHART MILL RD WOODSTOCK WOODSTOCK NEW BRUNSWICK NB E7M- 5C3 NEW BRUNSWICK NB E7M- 5C3 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City. & State City & State 4. FEI Number 59-3212896 Not Applicable Zip Country _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 BARRETT, MALCOLM Street Address (P.O. Box Number is Not Acceptable) 1308 WINTER SPRINGS BOULEVARD TUSCAWILLA FL 32708 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 the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE TITLE ☐ Delete BARRETT, EDWARD NAME NAME 300 LOCKHART MILL RD. STREET ADDRESS STREET ADDRESS WOODSTOCK, NEW BRUNSWICK CITY-ST-ZIP CITY-ST-ZIP TITLE PD ☐ Delete TITLE Change ☐ Addition NAME BARRETT, MALCOLM NAME STREET ADDRESS STREET ADDRESS 300 LOCKHART MILL RD. WOODSTOCK, NEW BRUNSWICK CITY-ST-ZIP-CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE VD NAME NAME BARRETT, WILLIAM STREET ADDRESS STREET ADDRESS 300 LOCKHART MILL RD. CITY-ST-ZIP CITY-ST-ZIP WOODSTOCK NEW BRUNSWICK Change ☐ Addition Delete TITLE TITLE NAME NAME GINSON, DAVID 300 LOCKHART MILL RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WOODSTOCK, NEW BRUNSWICK CITY-ST-7IP ☐ Addition ☐ Change TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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

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