FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

Jan 16, 2001 8:00 am DOCUMENT # P9400002888 **Secretary of State** 1. Entity Name 01-16-2001 90009 001 ***150.00 THE THREE FIFTY BUILDING, INC. Mailing Address Principal Place of Business 1175 CLEVELAND STREET, N.E. 1175 CLEVELAND STREET, N.E. CLEARWATER FL 33755 601300 CLEARWATER FL 33755 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3249416 Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CATHER, SUSAN Street Address (P.O. Box Number is Not Acceptable) 6561 44TH STREET, NORTH #3008 PINELLAS PARK FL 33781 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Delete PĎ TITLE NAME VERNICK, JACK NAME STREET ADDRESS 1175 CLEVELAND STREET, N.W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33755 ☐1 Change Addition Delete TITLE ٧D TITLE NAME VERNICK, MARK NAME STREET ADDRESS 1175 CLEVELAND STREET, N.W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33755 - ☐ Change - ☐ Addition □ Delete TITLE STD TITLE NAME VERNICK, DEBORAH NAME STREET ADDRESS 1175 CLEVELAND STREET, N.W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE CLEARWATER FL 33755 ☐ Addition Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY~ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.