2003 FOR PROFIT CORPORATION

SIGNATURE:

FILED Mar 10, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) P9400006437 **DOCUMENT#** 1. Entity Name 03-10-2003 90784 010 ***150.00 AIR & SEA ENTERPRISES, INC. Principal Place of Business Mailing Address 1323 S. E. 17 STREET C/O ACCOUNTING & BUSINESS CONSLTS #211 17 ROSE DRIVE FL. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316 US US 2. Principal Place of Business 3. Mailing Address c/o Acctg. & Bus. Cnslts Suite, Apt. #, etc. \$1535°SE 17th St., B206 ☐ CHECK HERE IF MAKING CHANGES Fort Lauderdale, FL City & State 4. FEI Number Applied For 65-0463432 33316 U.S. Not Applicable Zip Country 7in 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 JOHNSON, PAUL Street Address (P.O. Box Number is Not Acceptable) 1323 S.E. 17TH STREET # 211 FT LAUDERDALE FL 33316 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 (NOTE: Registered Agent signature required when reinstating) DATE 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. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition NAME JOHNSON, PAUL NAME 1323 S.E. 17TH STREET, # 211 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33316 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE. ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 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 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 changed, or on an attachment with an address, with abother like empowered.