2001 UNIFORM BUSINESS REPORT (UBR) Apr 24, 2001 8:00 am 1. Entity Name Secretary of State TEZ, INC. 04-24-2001 90033 001 \*\*\*150.00 Principal Place of Business Mailing Address 7230 16TH CT. N.E. 7230 16TH CT. N.E. ST. PETENSBUNG, f). 33702 ST. PETENSBURG FL. 33002 2. Principal Place of Business Mailing Address OI OSPREY RIDGE WAY Suite, Apt. #, etc. . Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For PONTE VEDRA BEACH, F. 9-3243476 Not Applicable \$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 J. CORTEZ RAGIANO 7230 16TH CT. N.E. Street Address (P.O. Box Number is Not Acceptable) ST. PETENSBUM, Fl. 33702 101 OSPREY RIDGE WAY
City PONTE VEDER BEACH 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back)\_\_\_\_\_ Make Check Payable to Department of State. 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDEM TITLE ☐ Delete TITLE ☐ Change Addition J. CORTEZ RAGLAND 101 OSPREY RIDGE WAY NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P PONTE VEDRA BOACH, CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ 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-ZIF CITY-ST-7JP 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?