2000 UNIFORM BUSINES'S REPORT (UBR) FILED Mar 22, 2000 8:00 am Secretary of State DOCUMENT # **P94000053665** 1. Entity Name NUWIN DEVELOPMENT, INC. 03-22-2000 90063 041 ***158.75 Principal Place of Business Mailing Address 1351 S.W. 4TH COURT 1351 S.W. 4TH COURT **BOCA RATON FL 33432** BOCA RATON FL 33432-7138 0 Z J J I V 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0512235 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NUZZO, MARK Street Address (P.O. Box Number is Not Acceptable) 1351 S.W. 4TH COURT **BOCA RATON FL 33432** City 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 DATE (NOTE: Registered Agent signature required when reinstating) 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. \Box 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. ☐ Addition ☐ Delete TITLE Change TITLE NUZZO, MARK NAME 1351 S.W. 4TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33432** CITY-ST-ZIP ST ☐ Addition Change ☐ Delete TITLE NUZZO, JOSEPH NAME 1351 SW 4TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL** Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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. OSEPH NUZZO