FILED 2003 FOR PROFIT CORPORATION Sep 17, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR** P94000057457 DOCUMENT # 1. Entity Name 09-17-2003 90021 009 ***150.00 DAVE'S BUTTONS &. INC. Principal Place of Business Mailing Address 23 COOLIDGE AVE. 23 COOLIDGE AVE. 23 COOLIDGE AVE., #D 23 COOLIDGE AVENUE, #D ORMOND BEACH FL 32174 ORMOND BEACH FL 32174 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4. FEI Number City & State Applied For 59-3285441 Not Applicable Zip Country 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 Name KNIGHT, SHERRY L Street Address (P.O. Box Number is Not Acceptable) 23-D COOLIDGE AVE. ORMOND BEACH FL 32174 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing **\$5.00** May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. П Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition KNIGHT, SHERRY L. NAME NAME 23-D COOLIDGE AVENUE STREET ADDRESS STREET ADDRESS ORMOND BEACH FL CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME . NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

2. 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 10 or Block 11 if changed, or on an attachment with an addiess, with all other like empowered.

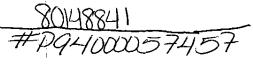
SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9//3/63 Date

Dougioso Ohene #

attachment



Seabreeze Bookkeeping & Tax Service 441 S. Ridgewood Avenue

Daytona Beach, Florida 32114 Telephone: (386) 258-5880

Thursday, September 11, 2003

Uniform Business Report
Florida Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Dave's Buttons & ,Inc.

To Whom It May Concern:

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Dr. Jan & Dr. College March & March & College

Our client did not receive the first Uniform Business Report. We are enclosing a check for \$150.00 and request that you abate any penalties. Thank you for your assistance.

Sincerely,

Susan L. Kidd

Accountant