2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 22, 2001 8:00 am Secretary of State DOCUMENT # **P9400060223** ALANJO ENTERPRISES INC. 03-22-2001 90049 008 ***150.00 Principal Place of Business Mailing Address 7000 West Palmetto Park Road Ste. 400 7000 WEST PALMETTO PARK ROAD BOCA RATON FL 33433 SUITE 200 A0036093 BOCA RATON FL 33433 2. Principal Place of Business 3. Mailing Address 7445 London Lane DO NOT WRITE IN THIS SPACE 7445 London Lane Boca Raton, FL 33433 Boca Raton, FL 33433 4. FEI Number Applied For 65-0529090 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 Name Garellek, Steven GARELLEK, STEVEN Street A 7000 WEST PALMETTO PARK 7445 London Lane SUITE 200 Boca Raton, FL 33433 **BOCA RATON FL 33433** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITI F ☐ Addition **GARELLEK, STEVEN** NAME 7445 London Lane NAME STREET ADDRESS 7000 W. PALMETTO PARK RD., STE. 200 STREET ADDRESS Boca Raton, FL 33433 CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP TITLE III E 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 TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition 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 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 a removement of the corporation of the corpo changed, or on an attachment with an address. SIGNATURE:

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR