2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with-

SIGNATURE

FILED May 07, 2001 8:00 am Secretary of State DOCUMENT # P94000083038 DOUGLAS INTERNATIONAL INC. 05-07-2001 90035 021 ***150.00 Mailing Address Principal Place of Business 2920 PADDOCK RD 2920 PADDOCK ROAD SUITE 504 SUITE 504 FT. LAUD. FL 33331 FT. LAUD. FL 33331 U\$ 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0694088 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 DOUGLAS, MARC Street Address (P.O. Box Number is Not Acceptable) 2920 PADDOCK ROAD FT. LAUD. FL 33331 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) DATE 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 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE DOUGLAS, MARC NAME NAME STREET ADDRESS 2920 PADDOCK RD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33331 CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE DOUGLAS, LYNN NAME NAME STREET ADDRESS 2920 PADDOCK RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33331 Change ☐ Addition TITLE TITLE □ Delete DOUGLAS, II, MARC NAME NAME STREET ADDRESS 2920 PADDOCK RD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33331 CITY-ST-ZIP ☐ Change Addition TITLE TITLE Delete DOUGLAS, TIFFANY NAME NAME STREET ADDRESS 2920 PADDOCK RD STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P FT LAUDERDALE FL 33331 ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP CITY-ST-ZIP 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 have the same that the same th