2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 30, 2001 8:00 am Secretary of State DOCUMENT # **P94000086274** 1. Entity Name TKD INVESTMENTS, INC. 01-30-2001 90182 024 ***150.00 Principal Place of Business Mailing Address 16320 FRONT BEACH ROAD 16328 FRONT BEACH RD PANAMA CITY BEACH FL 32413 PANAMA CITY FL 32413 2. Principal Place of Business 3. Mailing Address POBOX 221837 611 NE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3281420 HALLENDAI HOLLYWOOD Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired BROWARD 33022 BROWARD Fee Required 6. Name and Address of Current Registered Agent 7.- Name and Address of New Registered Agent DAHN, THOMAS R Street Address (P.O. Box Number is Not Acceptable) 16328 FRONT BEACH RD PANAMA CITY FL 32413 33509 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be 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 12. TITLE ☐ Delete TITLE NAME DAHN, THOMAS R NAME STREET ADDRESS POBOX 221837 16328 FRONT BEACH RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32413 HOLLYWOOD ☐ Delete TITLE NAME DAHN, KARLA D NAME STREET ADDRESS POBOX 221837 16328 FRONT BEACH RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32413 HOUYWOOD FL ☐ Delete TITLE 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

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 attact with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

City-St-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

NTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Defete

PRESIDENT **DAHO**

3669

Addition

☐ Addition

Change

Change