2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am Secretary of State P94000087147 DOCUMENT # 1. Entity Name 03-06-2002 90117 027 ***150.00 DANHAUER & REDDY, INC. Principal Place of Business Mailing Address 9902 N.W. 52ND TERRACE 9902 N.W. 52ND TERRACE MIAM! FL 33178 MIAMI FL 33178 2. Principal Place of Business 3. Mailing Address Bergamo <u>9543</u> 9543 Suite, Apt. #, etc. Suite, Apt. #, etc OO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0552588 AKE WORTH Not Applicable -AKE-LL)051 Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 334 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARX, JAMES Street Address (P.O. Box Number is Not Acceptable) 200 S. BISCAYNE BLVD. STE. 1870 **MIAMI FL 33131** City Zio Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Delete Change ☐ Addition NAME DANHAUER-REDDY, JUDY 8. NAME STREET ADDRESS 9902 NW 52ND TERRACE STREET ADDRESS 9543 Bergamo St. CITY-ST-ZIP **MIAMI FL 33178** CITY-ST-ZIP LAXEWORTH FL. 33467 TITLE VTS ☐ Delete TITLE Change ☐ Addition NAME REDDY, JAMES W. NAME STREET ADDRESS STREET ADDRESS 9902 NW 52ND TERRACE. 9543 Bargamo St. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33178 LAKE Worth FL 33467 ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ 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 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.

DANHAUER-REDDY 2-20-02

FILED