2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RHED DOCUMENT # P9500001295 Jul 21, 2000 8:00 am 1. Entity Name Secrétary of State **EKONOMY ENTERPRISES. INC.** 07-21-2000 90150 035 ***150.00 Principal Place of Business Mailing Address 7049 OKEECHOBEE ROAD 7049 OKEECHOBEE ROAD FT PIERCE FL 34945 FT PIERCE FL 34945 2. Principal Place of Business 2950 G. 25th 3. Mailing Address 2950 J treet Suite, Apt. #, etc. Suite. Ant. #. etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0544937 Florida Florida Pierce Ft. Herce ✓ Not Applicable \$8.75 Additional 5. Certificate of Status Desired 4981 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **ECONOMYS, PETER A** Street Address (P.O. Box Number is Not Acceptable) 7049 OKEECHOBEE ROAD FT PIERCE FL 34945 Pierce 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. TITLE TITLE ☐ Delete 2950 S. 25th Street ECONOMYS, PETER A " NAME NAME STREET ADDRESS STREET ADDRESS 7049 OKEECHOBEE ROAD Ft. Pierce, F1 34981 CITY-ST-ZIP CITY-ST-7IP FT PIERCE FL 34945 Delete TITLE Change ☐ Addition TITLE 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 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE 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 ether like empowered.



0003016 attachment P95000001295

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl 32302-1500

Re: Document # P95000001295

July 11, 2000

To Whom It May Concern:

We have just received our 2000 Uniform Business Report. We moved our offices about six months ago, and although we submitted a change of address, we never received the original report. Please abate the penalty. We are submitting this check on the day that we received the report. Thank you for your consideration.

Sincerely,

Peter Economys