## 2002 Uniform Business Report (UBR)

of the corporation or the receiver or trustee empowered to execute this rechanged, or on an attachment with an address, with all other like erpoore

SIGNATURE:

## Mar 18, 2002 8:00 am Secretary of State DOCUMENT # P95000025192 1. Entity Name 03-18-2002 90089 005 \*\*\*150 00 OCEAN ALLOYS, INC. Principal Place of Business Mailing Address 18295 LAKE BEND DR. 18295 LAKE BEND DR. JUPITER FL 33458 JUPITER FL 33458 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0574175 Not Applicable Zip Country Country \$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 ZUCKER, FREDERICK A Street Address (P.O. Box Number is Not Acceptable) 18295 LAKE BEND DR. JUPITER FL 33458 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 FILE NOW!!! FEE IS \$150.00 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 (9/01) ☐ Addition TITLE ☐ Delete TITLE NAME ZUCKER, FREDERICK A CR2E034 18295 LAKE BEND DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER FL 33458 CITY-ST-ZIP TITLE SVPT ☐ Delete ☐ Change ☐ Addition NAME ZUCKER, VIRGINIA STREET ADDRESS STREET ADDRESS 18295 LAKE BEND DR. CITY-ST-ZIP CITY-ST-ZIP Jupiter FL 33458 TITLE ⁻☐ Delete TITLE . Change ☐ Addition 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 Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITI F Delete 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

FRENERICK A. ZUCKER