2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P95000031396** Apr 28, 2000 8:00 am Secretary of State EXECUTIVE SEARCH INTERNATIONAL LICENSE OFFICES, 04-28-2000 90033 002 ***158.75 Principal Place of Business Mailing Address 733 NORTH MAGNOLIA AVENUE 733 NORTH MAGNOLIA AVENUE ORLANDO FL 32803 ORLANDO FL 32803-3835 2. Principal Place of Business 3. Mailing Address 733 N. Magnolia Ave. 733 N. Magnolia Ave. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State Orlando, FL City & State 4. FEI Number 59-3382328 Orlando, FL Not Applicable Country \$8,75 Additional Country 5. Certificate of Status Desired Fee Required 32803 32803 USA USA 7.-Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STONE, STEPHEN M Street Address (P.O. Box Number is Not Acceptable) 725 N. MAGNOLIA AVE ORLANDO FL 32803 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **X** Addition PD т ☐ Delete TITLE TITLE WOSGIEN, B.K. NAME LENA WOSGIEN NAME STREET ADDRESS STREET ADDRESS 733 N. MAGNOLIA AVE 733 N. MAGNOLIA AVE CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32803 ORLANDO FL 32803 ☐ Change Addition ☐ Delete TITLE DELONY, MANJE NAME STREET ADDRESS 8637 PISA DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32810 Delete T'Change Addition TITLE RODRIGUES, RUY NAME STREET ADDRESS STREET ADDRESS 733 NORTH MAGNOLIA AVENUE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITI F TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 trusted 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 artachment with an address, with all other like empowered.

Bernd K. Wosgien