2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 19, 2000 8:00 am Secretary of State DOGUMENT # P95000033886 CREST TRUST LTD., INC. 04-19-2000 90112 011 ***158.75 Principal Place of Business Mailing Address 777 S FLAGLER DRIVE 777 S FLAGLER DRIVE SUITE 1101E SUITE 1101E 1.000010 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401-6125 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0649860 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SHEWALTER, WILLIAM A Street Address (P.O. Box Number is Not Acceptable) 777 S FLAGLER DRIVE SUITE 1101E WEST PALM BEACH FL 33401 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing 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) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change TITLE Delete TITLE SILVESTRI. LAWRENCE A NAME STREET ADDRESS STREET ADDRESS 777 S FLAGLER DRIVE, STE 1101E CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 Addition ☐ Change TITLE Delete GEIST, MINNIE S NAME STREET ADDRESS STREET ADDRESS 777 S FLAGLER DRIVE, STE 1101E CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Change ☐ Addition Delete TITLE TITLE GARVIN, DORANNE M NAME NAME STREET ADDRESS STREET ADDRESS 777 S FLAGLER DRIVE, STE 1101E CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33401 Delete ☐ Addition TITLE Change TITLE NAME SHEWALTER, WILLIAM A NAME STREET ADDRESS STREET ADDRESS 777 S FLAGLER DRIVE. STE 1101E CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TO DELLE DE