FILED 2001 UNIFORM BUSINESS REPORT (UBR) Mar 02, 2001 8:00 am Secretary of State DOCUMENT # P95000060655 1. Entity Name B.T. BUSINESS MACHINES, INC. 03-02-2001 90083 026 ***150.00 Principal Place of Business Mailing Address 9091 N. MILITARY TR. PO BOX 7419 经保险的现在分词 SUITE 12 JUPITER FL 33468 PALM BCH GARDENS FL 33410 2. Principal Place of Business 3. Mailing Address 6250 No. Militar la 6250 No. Military TR Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0642067 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Beach 33407.7419 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TIRILLO, ATTILIO Street Address (P.O. Box Number is Not Acceptable) 6832 BIG CYPRESS DR. JUPITER FL 33458 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 After MAY 1, 2001 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PD CR2E034 (10/00) ☐ Change Addition TITLE Delete TITLE TIRILLO, ATTILIO NAME NAME STREET ADDRESS 6832 BIG CYPRESS DR. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP JUPITER FL 33458 VPD Change Addition TITLE ☐ Delete TITLE TIRILLO, BETTY M NAME NAME STREET ADDRESS 6832 BIG CYPRESS DR. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP JUPITER FL 33458 Change ☐ Addition TITLE ☐ Delete TITLE BRACKETT, ROSANNA NAME NAME STREET ADDRESS 4526 NW 34TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32605 ☐ Addition Change Delete TITLE TITLE BAYLISS, LOUISA NAME NAME STREET ADDRESS 4387 HAWTHORN AVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PALM BEACH GARDENS FL 33410 TITLE ☐ 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

ty Snillo, Vice President Betty Tixillo 2/21

☐ Delete

561-881-4419

☐ Change

☐ Addition

Daytime Phone #