FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

Apr 07, 2001 8:00 am Secretary of State DOCUMENT # P95000062768 BRADFORD HOLDINGS, INC. 04-07-2001 90021 017 ***150.00 Principal Place of Business Mailing Address 2108 N FEDERAL HWY 2108 N FEDERAL HWY B0026484 **BOCA RATON FL 33431 BOCA RATON FL 33431** DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0602883 Not Applicable \$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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 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, typed or printed name of registered agent and title if applicable. (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, 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Change ☐ Addition ☐ Delete TITLE TITLE BRADFORD GEISEN, BRADFORD NAME 2200 N FEDERAL HWY STE 203 NAME STREET ADDRESS STREET ADDRESS 2108 N FEDERAL HWY BOCA BATON FI 33431 CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL 33431** TITLE ☐ Delete TITLE MOTILLO, DOHINIC.A. MUTTILLO, DOMINIC A. NAME NAME STREET ADDRESS STREET ADDRESS 2108 N FEDERAL HWY CITY-ST-7IP CITY-ST-ZIP BOCA RATON FL 33431 ☐ Addition TITLE □ Delete TITLE SULLIVAN, GREGORY NAME SULLIVAN, GREGORY NAME 2200 N. FEDERAL HWY STE 203 STREET ADDRESS STREET ADDRESS 2108 N FEDERAL HWY CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** TITLE ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TÀLE TITLE ☐ Change ☐ Addition 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 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