2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 22, 2000 8:00 am Secretary of State DOCUMENT # P95000068748 SOUTHATLANTIC REALTY, INC. 02-22-2000 90044 006 ***150.00 Mailing Address rincipal Place of Business S SEMORAN BLVD 126 S SEMORAN BLVD ORLANDO FL 32807-3293 CC FL 32807 010000 3. Mailing Address Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3347089 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GARCIA, JOSE JR Street Address (P.O. Box Number is Not Acceptable) 793 GLENWOOD DR. LAKE MARY FL 32746 Zin Code City 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. DATE 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS CR2E034 (9/99) ח TITLE ☐ Addition ☐ Delete GARCIA, JOSE JR NAME STREET ADDRESS 793 GLENWOOD DRIVE CITY-ST-ZIP ST ZIP LAKE MARY FL 32746 Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ST ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete STREET ADDRESS CITY-ST-ZIP ST ZIP ☐ Delete TITLE Change ☐ Addition STREET ADDRESS AINDRECC CITY-ST-ZIP ST-7IP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ST-7IP 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 executive his report as reported 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.