2000 UNIFORM BUSINESS REPORT (UBR)

Apr 29, 2000 08:00 AM DOCUMENT # P95000075074 1. Entity Name **Secretary of State** FREE RENT, INC. Principal Place of Business Mailing Address 2176 W. OAKLAND PARK BLVD 2176 W. OAKLAND PARK BLVD FT. LAUDERDALE FT. LAUDERDALE FL FL 33311 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BARTON 2008 N.E. 21ST COURT Street Address (P.O. Box Number is Not Acceptable) WILTON MANORS 33305 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. 04/29/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE JS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D TITLE ☐ Detete X Change ☐ Addition BARTON SUZANNE NAME BARTON SUZANNE STREET ADDRESS 2008 NE 21STS COURT STREET ADDRESS 2606 GRACE DRIVE CITY-ST-ZIP WILTON MANORS \mathbf{FL} CITY-ST-ZIP FT. LAUDERDALE 33316 TITLE Delete TITLE X Change ☐ Addition NAME NAME BARTON DANIEL. 33/ BARTON DANIEL STREET ADDRESS 2008 N.E. 21ST COURT STREET ACCRESS 2606 GRACE DRIVE CITY-ST-ZIF WILTON MANOR FL. 33305 CITY-ST-7IP FT. LAUDERDALE FT. 33316 ☐ Delete TITLE TILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/8

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.

CIONIATURE. DANIEL W DARTON

D 04/20/

FILED