2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P95000079122 Sep 18, 2000 8:00 am Secretary of State 1. Entity Name SNAG'S BUSH HOGGIN, INC. 09-18-2000 90148 014 ***550.00 Principal Place of Business Mailing Address 1487 NW 154TH STREET 1487 NW 154TH STREET MIAMI FL 33054 MIAMI FL 33054 CPPC/UUA 2. Principal Place of Business 3. Mailing Address P.O. BOX 540383 15125 NW 18 AVE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE OPA-LOCKA City & State Applied For 4. FEI Number 65-0617557 Not Applicable Country \$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 PRINCE, THELONIUS Street Address (P.O. Box Number is Not Acceptable) -1487-NW-154TH-STREET-MIAMI FL 33054 N.W. AVE City OPA-L DCKA 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Pavable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PD CR2E034 (5/00) MLE Delete TITLE 🔼 Change ☐ Addition PRINCE, THELONIUS NAME 15/25 NW 18 AVE ···· -1487-NW-1547H-STREET STREET ADDRESS ST - ZIP CITY-ST-ZIP MIAMI FL 33054 SD ☐ Change ☐ Addition ☐ Delete TITLE MURRAY, LOUISE 1487 NW 154 ST STREET ADDRESS ST-ZIP CITY-ST-Z/P MIAMI FL TD ☐ Change Addition Delete TITLE MURRAY, ERNEST 1487 NW 154 ST STREET ADDRESS CITY-\$T-ZIP ST - 211 MIAMI FL ☐ Change Delete TITLE Addition PRINCE, LESTER NAME 1487 NW 154 ST STREET ADDRESS CITY-ST-ZIP ST-ZIP miami fl TITLE T Addition Delete SHELLETA AIN SEALS NAME 15125 NW 18 AVENUE STREET ADDRESS OPA-LOCKA, FL 33054 CITY-ST-ZIP ST-ZIP ☐ Addition ☐ Change Defete TITLE NAME STREET ADDRESS ST-ZIP CITY-ST-ZIP 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 supplied in a graph of the state 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 of trastee 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 wi 7- 33- 00