2001 UNIFORM BUSINESS REPORT (UBR) FILED May 02, 2001 8:00 am Secretary of State DOCUMENT # P96000055330 MOLLICA & SCHOLIN, P.A. 05-02-2001 90182 016 ***150.00 Mailing Address Principal Place of Business 505 SOUTH FLAGLER DRIVE 505 SOUTH FLAGLER DRIVE **SUITE 1001** SUITE 1001 CUUGIUGG W PALM BEACH FL 33401 W PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address 505 S. Flagler Drive 505 S. Flagler Drive DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 400 400 City & State 4. FEI Number Applied For City & State 65-0676727 West Palm Beach, FL West Palm Beach, FL Not Applicable Country \$8.75 Additional Zip Country Zip 5 Certificate of Status Desired Fee Required U.S.A. 33401 U.S.A. 33401 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Christian N. Scholin SCHOLIN, CHRISTIAN N Street Address (P.O. Box Number is Not Acceptable) 505 SOUTH FLAGLER DRIVE Suite 400 505 South Flagler Drive, **SUITE 1001** W PALM BEACH FL 33401 West Palm Beach Zip Code 33401 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 (NOTE: Registered Agent signature required when reinstating) of registered agent and title if applicable. Signature, typed or printed na FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change TITLE □ Defete TITLE NAME MOLLICA, KIM T STREET ADDRESS STREET ADDRESS 370 CAMINO GARDENS BLVD #118 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ★ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME SCHOLIN, CHRISTIAN N Scholin, Christian N. STREET ADDRESS 505 S. Flagler Drive, Suite 400 STREET ADDRESS 505 SOUTH FLAGLER DR #1001 West-Palm Beach, FL 33401 ☐ Change CITY-ST-ZIP CITY-ST-ZIP W PALM BEACH FL 33401 ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

- Christian N. Scholin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01

561-655-7711

Daytime Phone #