FILED May 21, 2003 8:00 am Secretary of State 05-21-2003 90396 001 ***300.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000066854 1. Entity Name SHIVER YBOR INVESTMENTS, INC.								03-21-2003 70370	001	500	.00	
Principal Place of Business Mailing Address 1617 E 8TH AVE 1617 E 8TH AVE TAMPA, FL 33605 US TAMPA, FL 33605 US							 		3427	- 		
2. Principal F	Place of Busin	3. Maili	3. Mailing Address				10/19/ (IL 18/8 SIII 18/11 SIII 18/11 SI				Ì	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State				City & State			4. FEI Number				plied For Applicable	-
Zip	Country		Zip			Country		5. Certificate of Status Desired S8.75 Additional Fee Required				
Name and Address of Current Registered Agent						Name	7. 1	lame and Address of New Register	ed Agent			7
LECHNER, 1243 LAKE CLEARWA					Street Address (P.O. Box Number is Not Acceptable)							
;						City			=L Z	ip Code		
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. I am familiar with, and accept the obligations of registered agent.												1
SIGNATURE Signature, typed or primed name of registered agent and time if application. (NOTE: Registered Agent signature required when airstaning) CATE												
FILE NOW! II. FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Psyable to Plorida Department of State							_	Election Campaign Financing Trust Fund Contribution.			O May Be to Fees	1
10.	Valenti Valenti di Stato di St	OFFICERS AN	ID DIRECTOR		11.		AD	DITIONS/CHANGES TO OFFICERS	NO DIRE	CTORS	IN 11	1_
NAME STREET ADDRESS CITY-ST-ZP	1	ULIUS J /LES ROAD I, FL 33511		□ Delete	8 -	,		, ·	□ ¢	hange	Addition	CR2E034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	J	ESSA G /LES ROAD I, FL 33511	·	☐ Delete	3		•			hange	Addition	CRZE
TITLE NAME STREET ADDRESS	T SHIVER, D 906 KNOW	IAMON C		☐ Delete	1file NAM STRE					hange	Addition	
CITY-ST-ZP	BRANDON	I, FL 33511		Delete	CAY	-51-21P				barre	Addition	{
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CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP				☐ Qelete	1ffu Nam Stre	j.			c	hange	Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNAT	SIGNATURE: SKOP TURE AND TYPE OR PRINTED PLANE OF SIGNARY OFFICER OR DIRECTOR DIRECT											

Affachment 55042723 #P96000066854

Date: May 8, 2003

UBR Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302-1500

Document # P96000066854 Document # P96000066858

To Whom It May Concern:

Please wave the late filling fee, since we never received the UBR form for the year 2003.

Also please use this form as my permission for an address change.

New address: 1915 Republica de Cuba

Tampa, Fl 33614

Thank you,

-Julius Shiver