FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Feb 19, 2001 8:00 am DOCUMENT # P97000000905 **Secretary of State** 1. Entity Name WACKY SALES & SERVICE, INC. 02-19-2001 90257 025 \*\*\*150.00 Principal Place of Business Mailing Address 1300 STIRLING RD 1300 STIRLING RD DANIA FL 33004 DANIA FL 33004 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0722481 Not Applicable 7in 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 JOHNSON, CHARLES H JR. Street Address (P.O. Box Number is Not Acceptable) 6455 BAY CLUB DR #4 FT LAUDERDALE FL 33308 OK. City Zip Code 8. The above named entity submit this statement for the pyripose of changing its registered office or registered agent, or both, in the State of Florida. V-15-7001 Trus. (NOTE: Registered Agent signature required when reinstating) title it applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Inta-10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition JOHNSON, CHARLES H JR. NAME NAME STREET ADDRESS 6455 BAY CLUB DR #4 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33308 Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIE ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 decliver 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 attagrament with appears, with all other like empowered.

YPED OR PRINTED NAME OF

SIGNATURE:

ES H. JOHNSON JR. Y-15-YOO, 954-