Apr-17-02 12:03P

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90434 007 ***150.00

671044

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000020504

1. Entity Name: VACATION CONDO RENTALS INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:

3. Mailing Address: 5726 Cortez Rd. W.
Suite, Apt #, etc.: #184
City & State: Bradenton, FL
Zip: 34210 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0733850 ☐ Applied for ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: Amerilawyer Chartered
Street Address (P.O. Box Number is Not Acceptable): 343 Almeria Avenue
City: Coral Gables FL Zip Code: 33134

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 ______________________ DATE

9. This corporation is eligible to satisfy the intangible tax filing requirement and elects to do so. (See instructions on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: PSTD NAME: Richard Boivin STREET ADDRESS: 5726 Cortez Rd. W #184 CITY-ST-ZIP: Bradenton, FL 34210	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
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CR2E034B (12/01)

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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: R. R. Boivin President 4/17/02 (941) 739-5792
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

R. Richard Boivin