2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State DOCUMENT # **P97000035028** 1. Entity Name FXF. INC. 04-25-2001 90082 015 ***150.00 Principal Place of Business Mailing Address PO BOX 619500 PO BOX 619500 MIAMI FL 33261 MIAMI FL 33261 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0747774 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namé FARREY, JOHN F Street Address (P.O. Box Number is Not Acceptable) 1850 NW 146 ST MIAMI FL 33181 Zip Code City 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 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 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change ☐ Addition TITLE TITLE Delete NAME NAME FARREY, FRANCIS X STREET ADDRESS STREET ADDRESS 104 E. SAN MARINO DR. CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Addition Change ☐ Delete TITLE TIT! F NAME NAME FARREY, FRANCIS X JR. STREET ADDRESS STREET ADDRESS 104 E. SAN MARINO DR. CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Change ☐ Addition □ Delete TITLE TITLE NAME NAME EVANS, LELIA F STREET ADDRESS STREET ADDRESS 104 E. SAN MARINO DR. CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME FARREY, JOHN F STREET ADDRESS STREET ADDRESS 104 E. SAN MARINO DR. CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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

SIGNATURE: JOHN F FARREY 4/20/01 305-947-5451
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #

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