2002 UNIFORM BUSINESS REPORT (UBR)

FILED Sep 09, 2002 8:00 am Secretary of State P97000046800 DOCUMENT # 1. Entity Name 09-09-2002 90016 023 ***150.00 AFRICAN TRADING COMPANY Principal Place of Business Mailing Address 12242 GRAY BIRCH CIRCLE 12242 GRAY BIRCH CIRCLE ORLANDO FL 32832 ORLANDO FL 32832 2. Principal Place of Business 3. Mailing Address 73a Lee Janzen 7*32* Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City-& State 4. FEI Number Applied For 59-3476843 1551 M WEE 1951MMC4 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Richard SLATER, RICHARD J Street Address (P.O. Box Number is Not Acceptable) 12242 GRAY BIRCH CIRCLE Janzen ORLÁNDO FL 32832 ISSIMMER 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 P Slater, RJ 1732 Lee Janzen DR. TITLE ☐ Delete TITLE Change . ☐ Addition SLATER, R J NAME 12242 GRAY BIRCH CIR STREET ADDRESS STREET ADDRESS ORLANDO FL 32832 KISSIMUPE, FL 34744 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-7iP

CITY-ST-ZIP

African Trading Company

Division of Corporations P.O. Box 1500 Tallahassee, FL=32302=1500

To Whom it may concern:

I am requesting that the filing fee of \$550.00 be waived and held to the original amount of \$150.00. I have no record of receiving the previous notice and, until I went to fill this form out, thought that the filing date had changed. My address has changed and, because I have not had a problem with this in the past, I can only assume that the original filing report did not get forwarded or got lost in the move. I have enclosed the report and the filing fee of \$150.00. Thank you for your consideration in this matter.

Sincerely,

Richard J. Slater

President