2001 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 31, 2001 8:00 am Secretary of State **DOCUMENT #** P97000066169 1. Entity Name 08-31-2001 90110 005 ***150.00 SCHNEIDER BROKERAGE, INC. Principal Place of Business Mailing Address 15277 CITRUS GROVE BLVD 15277 CITRUS GROVE BLVD LOXAHATCHEE FL 33470 LOXAHATCHEE FL 33470 2. Principal Place of Business Grave Blvd 1, trus Gran Sh 5846 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0772520 oxa hatelee Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCHNEIDER, JAY S Street Address (P.O. Box Number is Not Acceptable) 15277 CITRUS GROVE BLVD LOXAHATCHEE FL 33470 Zip Code 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5:00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. \Box (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, 12. (5/01)TITLE TITLE Change ☐ Addition Delete Schneider Jay 15846 Citrus Grove Blod SCHNEIDER, JAY NAME NAME 15277 CITRUS GROVE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LOXAHATCHEE FL 33470 CITY-ST-ZIP 33470 Loxahatchee Change ☐ Addition TITLE ☐ Delete TITLE NAME SCHNEIDER, KATHERINE NAME 15846 Citrus Grave 13 12 STREET ADDRESS 15277 CITRUS GROVE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LOXAHATCHEE FL 33470 ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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-ZIP CITY-ST-ZIP ☐ Delete TITLE DITE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

STREET ADDRESS

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SIGNATURE:

13. I hereby certify that the informat indicated on this report or supply of the corporation or the changed, or on an attac

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ith this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 by ered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SCHNEIDER BROKERAGE, INC. 15846 CITRUS GROVE BLD LOXAHATCHEE, FL 33470 Attachment p#p92000 lobber filtsold

August 24, 2001

Florida Department of State Division of Corporations

SCHNEIDER BROKERAGE, INC: /document #: P97000066169

To Whom It May Concern:

Please find enclosed my check #: 2040 in the amount of \$ 150.00 (One hundred and fifty dollars) for my annual corporate fee for Schneider Brokerage, Inc.

I spoke with a representative in your office and explained that I had moved and did not receive the original invoice. Your representative explained to me, that I should submit a letter in writing with my check in the amount of \$ 150.00 (One hundred and fifty dollars), with my new address.

Please see all the address changes that apply. I have been in good standing every year with my annual filing with my corporation since it was first established years ago.

Respectfully,

Jay S. Schneider President