2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

May 24, 2002 8:00 am Secretary of State DOCUMENT # P97000069790 1. Entity Name 05-24-2002 91308 037 ***150.00 SUNSHINE REFRESHMENT SERVICES, INC. Principal Place of Business Mailing Address 185 DRENNAN RD 185 DRENNEN RD - - TINTY SUITE 351 STE 351 ORLANDO FL 32806 ORLANDO FL 32806 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3462900 Not Applicable Zip Country Zip 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 Name: LUCIA, FRANK Street Address (P.O. Box Number is Not Acceptable) 185 DRENNEN RD SUITE 351 ORLANDO FL 32806 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. SIGN/*TURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete ☐ Change TITLE TITLE ☐ Addition NAME BENNETT, JOHN NAME STREET ADDRESS STREET ADDRESS 185 DRENNAN RD CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32806 ☐ Delete ☐ Addition TITLE TITLE Change NAME ULLO, PHILIP P NAME STREET ADDRESS STREET ADDRESS 185 DRENNAN RD CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32806 -- -- Delete: 🕮 --Change ___ Addition. NAME NAME LUCIA, FRANK STREET ADDRESS 185 DRENNAN RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32806 ☐ Delete ☐ Change ☐ Addition NAME LAWLOR, MICHAEL NAME STREET ADDRESS 185 DRENNAN RD STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-ZIP TITLE ☐ Delete 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-ZIP 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 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.

FILED