FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 03, 2001 8:00 am Secretary of State DOCUMENT # P97000075686 GUNTHER STRUGGER ENTERPRISES, INC. 4-03-2001 90056 041 ***150.00 Principal Place of Business Mailing Address 5905 S CONGRESS AVE 5805 S CONGRESS AVE ATLANTIS FL 33462 ATLANTIS FL 33462 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0776927 Not Applicable 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 FRANKLIN, ELLIOTT Street Address (P.O. Box Number is Not Acceptable) 5315 LAKE WORTH RD LAKE WORTH FL 33463 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) FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition STRUGGER, GUNTHER NAME NAME STREET ADDRESS 5805 S CONGRESS AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTIS FL 33462 TITLE ☐ Delete TITLE ☐ Change □ Addition NAME STRUGGER, NUALAGH NAME STREET ADDRESS 5805 S CONGRESS AVE STREET ADDRESS CITY-ST-ZIP-CITY-ST-ZIP ATLANTIS FL 33462 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ 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-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ 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.

Gunther Strugger 3/29/01 56/64/3330 DAYLORD