Jun 11, 2002 8:00 am 2002 UNIFORM BUSINESS REPORT (UBR) **Secretary of State** P97000099335 DOCUMENT # 05-08-2002 90059 038 ***150.00 1. Entity Name PROMELAS RESEARCH CORPORATION Principal Place of Business Mailing Address 1519 THIRD STREET, S.E. 1519 THIRD STREET, S.E. WINTER HAVEN FL 33880 WINTER HAVEN FL 33880 2. Principal Place of Business 3. Mailing Address 2002 Helena 6189 avare Ct Suite, Apt. #, etc. Suite, Act. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For WINES 59-3485825 Winter Haven Not Applicable Country \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAFOOL, RAYMOND J II Street Address (PO Box # (19 Not Acceptable) 1519 THIRD STREET, S.E. WINTER HAVEN FL 33880 8. The above named entity submits y/is s e purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fe Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Defete IIII F☐ Change Addition (9/01) NAME rafool, Brandon J NAME 1519 THIRD STREET, S.E. STREET ADDRESS STREET ADDRESS CR2E034 WINTER HAVEN FL 33880 CITY-ST-ZIP CITY-ST-ZIP TITLE Oelete TITLE ☐ Change ☐ Addition NAME RAFOOL, CHRISTIAN B NAME STREET ADDRESS 1811 GARDEN LAKE DRIVE STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL 33880 CITY-ST-7IP TITLE-Deleta_- - . TITLE -NAME RAFOOL, GORDON J NAME STREET ADDRESS 635 FIRST STREET N STREET ADDRESS CITY-ST-ZIP WINTER HAVENU FL 33880 CITY-ST-7IP TITLE Deleta TITLE Change ☐ Addition RAFOOL RAYMOND J II NAME NAME STREET ADDRESS 1519 THIRD STREET, S.E. STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL 33880 CITY-ST-709 TITI F ☐ Delete TITLE ☐ Change ☐ Addition MALIF THOMPSON, SCOTT K

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 inclicated 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the control of the corporation of the corporation of the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the corporation of the corporation of the corporation of the corporation of the receiver of trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the corporation of the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in Block 1

NAME

TITI F

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

2002 HELENA ROAD

THOMPSON, DARYL L

2002 HELENA ROAD

WINTER HAVEN FL 33884

WINTER HAVEN FL 33884

SIGNATURE AND TYPED OR PRINTED NAME

Delete

☐ Change

Addition

FILED