2002 UNIFORM BUSINESS REPORT (UBR)

Mar 24, 2002 8:00 am secretary of State P97000100442 DOCUMENT # 1. Entity Name TREND ADVERTISING, INC. 03-24-2002 90020 002 ***150.00 Principal Place of Business Mailing Address 1792 PERSIMMON CIRCLE 1792 PERSIMMON CIRCLE EDGEWATER FL 32132 EDGEWATER FL 32132 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3488985 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARLOW, GEORGE Street Address (P.O. Box Number is Not Acceptable) 1792 PERSIMMON CIRCLE **EDGEWATER FL 32132** 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 11. Change ☐ Addition TITLE TITLE ☐ Delete BARLOW, GEORGE NAME NAME 1792 PERSIMMON CIRCLE STREET ADDRESS STREET ADDRESS **EDGEWATER FL 32132** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Detete TITLE BARLOW, MARLENE S NAME NAME 1792 PERSIMMON CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-78 **EDGEWATER FL 32132** ☐ Change _ ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

ss, with all other like empowered.

changed, or on an attachment with an ada

March 03, 2002 Pres_Dir

FILED