Mailing Address

2246 TUSCAVILLA RD. TALLAHASSEE FL 32312-5025

3. Mailing Address

City & State

Suite, Apt. #, etc.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

NAME

TITLE

NAME

City

DOCUMENT # P97000106287

Country

WEBB-YAROSH, BELINDA

9. This corporation is eligible to satisfy its Intangible

P WEBB-YOUSH, BELINDA

TALLAHASSEE FL 32312

2246 TÚŚCAVILLA RD

Tax filing requirement and elects to do so.

(See criteria on back)

11.

TITLE

NAME

NAME

TITLE

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TITLE

NAME STREET ADDRESS

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-SY-7IP

CITY-ST-ZIP

CITY-ST-ZIE

CITY-ST-ZIP

6. Name and Address of Current Registered Agent

P. O. BOX 13774 _ 2246 Tuscavilla Rd. TALLAHASSEE FL 32317

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

LOU BOB'S UNLIMITED, INC.

1. Entity Name

Principal Place of Business 2246 TUSCAVILLA RD.

2. Principal Place of Business

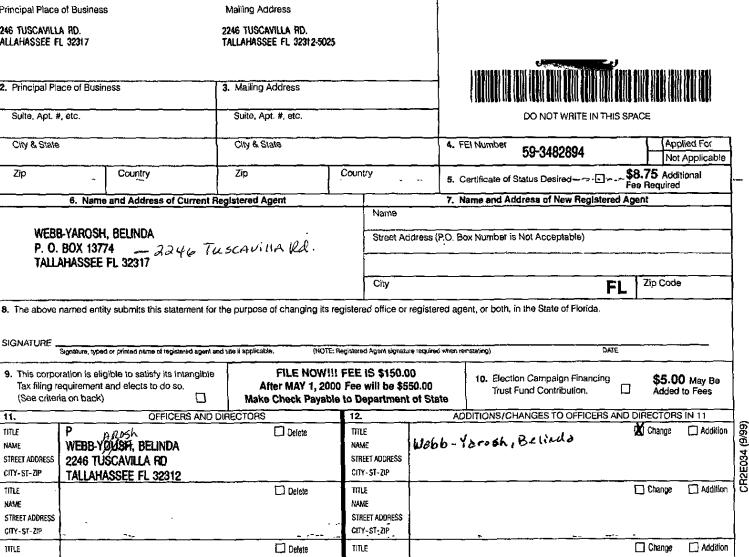
TALLAHASSEE FL 32317

Suite, Apt. #, etc.

City & State

05-01-2000 90419 002 ***150.00

May 19, 2000 8:00 am Secretary of State



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.

CONTROL ASTA OSA EBOLIN DE WOOD - Yansh 4/20/W 850-841-3662.

RIGHATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

Data

Data

Data

Data

Data

☐ Change

☐ Change

Change

Addition

☐ Addition

Addition