2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

FILED DOCUMENT # P97000108170 Aug 29, 2000 8:00 am Secretary of State 1. Entity Name PMG TRANSPORTATION, INC. 08-29-2000 90033 018 ***150.00 Principal Place of Business 1 Mailing Address 6300 HAZELTINE NATIONAL DRIVE 6300 HAZELTINE NATIONAL DRIVE SUITE 104 SUITE 104 ORLANDO FL 32822 ORLANDO FL 32822 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3498609 Not Applicable Zip Country 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 MURRAY. RENE Z Street Address (P.O. Box Number is Not Acceptable) 6300 HAZELTINE NATIONAL DRIVE SUITE 104 ORLANDO FL 32822 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 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 SEPTEMBER 13, 2000 Min, will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F Change ☐ Addition TITLE Delete NAME MURRAY, THOMAS R NAME STREET ADDRESS STREET ADDRESS 6300 HAZELTINE NATIONAL DRIVE, SUITE 104 CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32822 ☐ Addition ☐ Delete TITLE Change NAME GAIN, JAMES G STREET ADDRESS STREET ADDRESS 6300 HAZELTINE NATIONAL DRIVE, SUITE 104 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32822 ☐ Change Addition NAME. MURRAY, RENE Z. NAME STREET ADDRESS STREET ADDRESS 6300 HAZELTINE NATIONAL DRIVE. SUITE 104 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32822 ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME GAIN, ANGELA STREET ADDRESS STREET ADDRESS 6300 HAZELTINE NATIONAL DRIVE, SUITE 104 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32822 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE TITLE Delete 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 of the corporation or the receiver or trusted and accourate 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 trusted and powered 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.

Thomas R Murray 8-21-00





Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs,

Please be advised that an original report was never received at our business. We ask that you waive any fees and or late charges in consideration of this fact.

Thank you,

8-21-co

Thomas R Murray