2001 UNIFORM BUSINESS REPORT (UBR)

May 30, 2001 8:00 am DOCUMENT # P9 8000008489 Secretary of State 05-30-2001 90027 049 ***150.00 TDY KACEE, INC Mailing Address Principal Place of Business 5415 Baysture BIVI Tampa FL 5:3611-4113 5415 Bayshore Blvd Tampa ÉL 33611 772002 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-3511189 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Filings Inc 3732 N.W. 16thst. Street Address (P.O. Box Number is Not Acceptable) Ft Landerdole FL 33311-4132 Zip Code City F۱ 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 algorithms required when reinstating) FILE NOW!) FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 16. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition Delete TITLE Reynolds, Karen M 4001 W. BAY AVE Reynolds, Karen M NAME 4734 W. Trilby STREET ADDRESS STREET ADDRESS COY-ST-ZIP Tampa FL 33616 Tampa FL 33616 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE Garrey, Lev (NAME NAME 21 parkridge Ave#9 STREET ADORESS STREET ADDRESS CITY-ST-ZIP Salem ... NH 33616 CITY-ST-ZIP ■ Addition ☐ Change □ Delete TITLE me NAME workowicz, Cindy A NAME Walkowicz, Condy A STREET ADDRESS 4734 W. Trilby STREET ADDRESS 4001 W. BAY AVE Tampa FL 33616 CITY-ST-ZIP Tampa FL 33616 CITY-ST-ZIP Change ■ Addition TITI F TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Addition Change Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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 is 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.

CITY-ST-ZIP

SIGNATURE: Karenmkeyols

STREET ADDRESS

CITY-ST-ZIP

BIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER CR DIRECTOR

FILED

Attachment D#1980UXXX8489

TDYKACEE INC 5415 Bayshore Blvd Tampa FL 33616 813) 835-4247

May 11, 2001

Florida Department of State Division of Corporations PO Box 1500 Tallahassee FL 32302-1500

To Whom It May Concern:

This is in regards to the late filing of my Uniform Business Report. I never received the original form in the mail and my address has not changed. The only thing that probably happened is the form was lost in the mail.

I went onto the Internet and downloaded the proper form to be filled out. I have two address changes which I indicated in section 12.

Thank you for your cooperation in this matter and if you have any questions you can reach me at the above number.

Sincerely,

Karen M. Reynolds

President/Owner