2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P98000011877 Mar 29, 2000 8:00 am **Secretary of State** PREMIER GROUP REALTY INC. 03-29-2000 90078 015 ***150.00 Principal Place of Business Mailing Address 6800 GULF BLVD 6800 GULF BLVD ST. PETERSBURG BEACH FL 33706-2028 ST. PETERSBURG BEACH FL 33706 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3488047 Not Applicable Country \$8.75 Additional 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 Gale Apple JOHANNESSON, JOANNE Street Address (P.O. Box Number is Not Acceptable) 8014 12TH AVE. SO. 1187 79th St. S. ST. PETEERSBURG FL 33707 Zip Code 33707 St. Petersburg 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. 3/21/00 (NOTE, Registered Agent signature required when reinstating) 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, 2000 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITL F TITLE ☐ Delete KIRBY, ELANOR P NAME STREET ADDRESS STREET ADDRESS 2801 66 WAY N CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33710 ☐ Delete Change Addition TITLE TITLE. JOHANNOSSON, DANIEL NAME NAME Johannesson, Daniel STREET ADDRESS STREET ADDRESS 8014 12 AVE ST CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33707 Addition ☐ Delete -TITLE TITLE NAME APPLE, GALE NAME STREET ADDRESS STREET ADDRESS 1187 79TH ST S CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33707 Change ☐ Addition ☐ Delete TITLE TITLE NAME APPLE, NORMA T NAME 1187 79TH ST S STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST PETERSBURG FL 33707 ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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

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 life

SIGNATURE: 5

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