FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jan 19, 2001 8:00 am DOCUMENT # P98000012421 Secretary of State 1. Entity Name A FEW MORE THINGS, INC. 01-19-2001 90038 039 ***150.00 Principal Place of Business Mailing Address 1438 NE 26TH ST 1438 NE 26TH ST FORT LAUDERDALE FL 33305-1322 FORT LAUDERDALE FL 33305-1322 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 65-0857542 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 Name CORRECT CUSHING, DIANE Y Street Address (P.O. Box Number is Not Acceptable) 1438 ME 26TH ST 1438 N.E. 26 TH ST FORT LAUDERDALE FL 33305 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition CR2E034 (10/00) TITLE ☐ Delete TITLE Change WHITE, ELSIE M NAME NAME STREET ADDRESS 1438 NE 26TH ST STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33305 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition DIXON, DAVID L NAME NAME STREET ADDRESS 1438 NE 26TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33305 TITLE ☐ Delete TITLE ☐ Change Addition CUSHING, DIANE Y NAME NAME STREET ADDRESS 1438 NE 26TH ST STREET ADDRESS FORT LAUDERDALE FL 33305 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITI F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF 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. 954 565-7011

DIANE CUSHING

Daytime Phone #

TReA3

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR