FILED
May 21, 2003 8:00 am
Secretary of State

04-02-2003 90086 015 ***150.00

55042425

2003 FOR PROFIT C RPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000023697

Entity Name
REAK TIME SNACKS, INC.

Principal Place of Business	Mailing Address
NORTHEAST SECOND AVENUE ANIA FL 33004	18 NORTHEAST SECOND AVENUE DANIA FL 33004

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0819934 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHEINKMAN, MARTIN 18 NORTHEAST SECOND AVENUE DANIA FL 33004	Name: MERRILL GARTHWAIT Street Address (P.O. Box Number is Not Acceptable): 6203 SW 55th COURT City: DAVIE FL Zip Code: 33314

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature]

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVST GARTHWAIT, ELIZABETH 11950 N.E. 2ND AVENUE NORTH MIAMI FL 33161 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD merrill Garthwait 6203 SW 55th Ct. Davie, FL 33314 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Petra Garthwait 6203 SW 55th Ct Davie, FL 33314 ☐ Change ☒ Addition
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

[signature]

attachment

P98000023697

4/2/2003-90086-015-$150.00-$150.00

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DANIA FL 33004

Mailing Address
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SIGNATURE Merrill Garthwait — 4-1-03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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SIGNATURE: Merrill Garthwait SIGNATURE REQUIRED — 4-1-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #