2000 UNIFORM BUSINESS REPORT (UBR) FILED Feb 22, 2000 8:00 am Secretary of State DOCUMENT # **P98000029958** JASS WORLDWIDE, INC. 02-22-2000 90012 033 ***150.00 Principal Place of Business Mailing Address N. U.S. 1 3935-L N. U.S. 1 COCOA FL 32926-5987 பாப் FL 32926 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3508090 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HIGGINBOTHAM, TRACEY C 3935-L N. US. 1 COCOA FL 32926 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 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. L. GEORGE LEONARD SCHANGE XAddition 1485N. ATLANTIC AVE #112 Delete TITLE HIGGINBOTHAM, TRACEY C NAME NAME 3935-L N. US 1 STREET ADDRESS STREET ADDRESS COCOA BEACH, FZ 3431 Change CITY-ST-ZIP CITY-ST-ZIP COCOA FL 32926 ☐ Addition TITLE TITLE □ Delete SHAW, JOHN G NAME NAME 3935-L N. US 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP COCOA FL 32926 D'Delète TITLE Change · [] Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition NAME 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 Change ☐ Addition Delete TITLE 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 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.

SIGNATURE: