2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am DOCUMENT # P98000046071 **Secretary of State** 1. Entity Name 03-06-2002 90109 024 ***150.00 PLATED GOLD INC. Principal Place of Business Mailing Address 130 TARPON CIRCLE 130 TARPON CIRCLE WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 3. Mailing Address 2. Principal Place of Business 130 Targon Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 59-3548552 winte. Not Applicable \$8.75 Additional 5. Certificate of Status Desired 32708 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **BOSTICK, JERRY C** Street Address (P.O. Box Number is Not Accepted) 130 TARPON CIRCLE WINTER SPRINGS FL 32708 Zip Code 32708 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 signature required when reinstating) 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, 2002 Fee will be \$550.00 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 11. 12. TITLE Delete BOSTICK, JERRY C NAME Bastick Dessie A. STREET ADDRESS 130 TARPON CIRCLE STREET ADDRESS Tarpon Circle CITY-ST-ZIP WINTER SPRINGS FL 32708 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 path; that I am an officer or director of the corporation or the rece ed 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 attachm

SIGNATURE:

CR2E034 (9/01