FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 15, 2002 8:00 am Secretary of State P98000056052 DOCUMENT # 1. Entity Name FLORIDA HOLIDAY INVESTMENT COMPANY, INC. 01-15-2002 90018 048 ***158.75 Principal Place of Business Mailing Address 11300 U.S. HIGHWAY ONE 11300 U.S. HIGHWAY ONE SUITE 203 SHITE 203 NORTH PALM BEACH FL 33408-3208 NORTH PALM BEACH FL 33408-3208 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 65-0853805 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HORSTMANN INVESTMENT COMPANY, INC. Street Address (P.O. Box Number is Not Acceptable) 11300 U.S. HIGHWAY ONE SUITE 203 NORTH PALM BEACH FL 33408-3208 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 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 11. 12. CR2E034 (9/01) Addition TITLE PD Change TITLE Delete LUGER, ADOLF E PROF. NAME NAME H. MAX FRICKER **WULFTER STRASSE 3.** STREET ADDRESS STREET ADDRESS 11300 U.S. HWY One, Suite 203 D-49635 BADBERGEN, GERMANY CITY-ST-ZIP CITY-ST-ZIP North Palm Beach, FL 33408-3208 Delete TITLE Change ☐ Addition TITLE NAME HORSTMANN, ARNOLD NAME STREET ADDRESS STREET ADDRESS HAUPLSTRASSE 10 PORTA WESTFALICA, GERMANY D-324-7 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE 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 ☐ Delete TITLE Change ■ Addition TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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:

(H. Max/Fricker, pre SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/2002

Date

(561)625-1005

Daytime Phone #

FLORIDA HOLIDAY
INVESTMENT COMPANY, INC.

January 8, 2002

UNIFORM BUSINESS REPORT Division of Corporation 409 East Gaines Street Tallahassee, FL 32399

Re:

FLORIDA HOLIDAY INVESTMENT COMPANY, INC.

FEI Number 65-0853805

To Whom It May Concern:

Enclosed please find Year 2002 UNIFORM BUSINESS REPORT, including check # 1157 in the amount of \$158.75, representing filing fee of \$150.00 and Certificate of Status fee of \$8.75.

Please note the requested changes in Block 12.

Thank you for your kind assistance in this matter, please telephone with any questions you may have.

Sincerely,

FLORIDA HOLIDAY INVESTMENT COMPANY, INC.

H. Max Fricker, pres.

Enclosures