2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P980000 6358 H Aug 03, 2000 8:00 am Secretary of State Kenny's tishing Adventures Inc 08-03-2000 90029 012 ***150.00 Principal Place of Business Mailing Address 2350 Ne 1955t AMI, FL 33180 nnn76343 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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) 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. Added to Fees __Trust,Fund Contribution. Make Check Payable to Department of State (See criteria on back)* ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Change Addition President TITLE ☐ Delete TITLE Kenneth Munyon 2350 me 1954 Street NAME STREET ADDRESS STREET ADDRESS ME. Muami CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 OF JUNING OFFICER OR DIRECTOR Date Daytime Phone # SIGNATURE AND TYPED OR PRINTED NAM

2350 NE 195th Street Miami, FL 33180 305-705-0850

July 2, 2000

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re.: P98000063584, Kenny's Fishing Adventures. Inc.

Dear Sir/Madam,

I am writing you in regards to the late filing of my corporate report for this year. I moved last October and did not receive my report at my new address. Being a new business, I really didn't notice this until my accountant asked me for it. I had filed for an extension this year and my accountant, in completing my income taxes, noticed I was missing the payment for the report.

I hope you will accept my apologies. I have enclosed the \$150.00 filing fee. Thank you for your patience.

Sincerely,

Kenneth Munyon