2000 UNIFORM BUSINESS REPORT (UBR) FILED Jun 23, 2000 8:00 am TEG Associates, Inc. **Secretary of State** 06-23-2000 90107 038 ***150.00 Principal Place of Business 4667 NW 42nd St. Landerdale Lakes, FL 33319 00066114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4667 NW 42nd St. City & State 4. FEI Number Applied For 125-0855024 auderdale Lakes, FL Not Applicable \$8.75 Additional 5. Certificate of Status Desired Broward Fee Required 7. Name and Address of New Registered Agent GREGORY F. BUTton GREGORY F. BUTTON Street Address (P.O. Box Number is Not Acceptable)
4 46 7 NW 43nd 5 + 12-61 4667 NW 427354. Lavderdale Lakes, FL 33319 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 Gragory F. Burton
Signature, typed or printed name of registered agent and title if applicable. 5/31/00 FILE NOWIII FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible... \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. President Tani Davis Hero NW 420 St. President Othange O

Gregory F. Burfun

4667 NW 42nd 5t,

LGVEXTER Lanker, FL 33319 Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS Lauderdale LalsesFL 33319 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE_ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME 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 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 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 eath; 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:

GREGURY F. BUT + BAT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING