2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Aug 20, 2001 8:00 am Secretary of State P98000072352 DOCUMENT # 1. Entity Name B & S LEASING, INC. 08-20-2001 90068 032 ***150.00 Principal Place of Business I Mailing Address 750 1/2 WEST 15TH STREET 750 1/2 WEST 15TH STREET PANAMA CITY FL 32401 PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3535063 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SIMMS, JAMES L Street Address (P.O. Box Number is Not Acceptable) 750 1/2 WEST 15TH STREET PANAMA CITY FL 32401 City Zip Code 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) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition SIMMS, JAMES L NAME NAME 2431 FRANKFORD AVE STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32405 CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition 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 Addition 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

ATTACHMENT

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P98000072352 DOC#285238 AW81918 S18129

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302-1500

Dear Sir or Madam:

Our client, James L. Simms, has received the second request for the Uniform Business Report forms for three different corporations, without having received the first request for any of the three corporations. We feel it may have been possible to misplace one report, but not three out of three.

Therefore, in accordance with instructions from your office, we are filing the three corporate reports with the \$150 filing fee for each corporation. We would appreciate your help in this matter.

Sincerely yours,

Douglas R. Johnson, CPA

August 9, 2001