2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 22, 2000 08:00 AM DOCUMENT # **P98000072577** 1. Entity Name **Secretary of State** L & L INVESTMENTS, INC. Principal Place of Business Mailing Address 18 E LEXINGTON LANE WEST 18 E LEXINGTON LANE WEST PALM BEACH GARDENS FL PALM BEACH GARDENS FL 33418 33418 2. Principal Place of Business 3. Mailing Address 2618 26TH COURT 2618 26TH COURT Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For JUPITER FL JUPITER FL. 65-0856693 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33477 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LAURIE DIIDA LAURIE 18 E LEXINGTON LANE WEST Street Address (P.O. Box Number is Not Acceptable) 2618 26TH COURT PALM BEACH GARDENS 33418 City Zip Code JUPITER 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. 04/22/2000 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 After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D Delete TITLE D X Change ☐ Addition DUDA LAURIE NAME DUDA LAURIE STREET ADDRESS 18 E LEXINGTON LANE WEST STREET ADDRESS 2618 26TH COURT CITY-ST-ZIP PALM BEACH GARDENS 33418 CITY-ST-ZIP JUPITER 33477 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-718 ☐ Delete TITLE TILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

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