2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000074437

1. Entity Name

WHOLESALE WAREHOUSE EXPRESS, INC.

Principal Place of Business 1931 N. CARPENTER ROAD

Mailing Address

TITUSVILLE FL 32796

1931 N. CARPENTER ROAD **TITUSVILLE FL 32796-1151**

3. Mailing Address 2. Principal Place of Business 1415 Garden St <u>1415 Garden St</u> Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

FILED Jan 24, 2000 8:00 am Secretary of State

01-24-2000 90037 038 ***163.75

PARAPARA

DATE



DO NOT WRITE IN THIS SPACE 59356362PLIED FOR 4. FEI Number Applied For Titusville Titusville Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 32796 USA 32796 USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name N/A BESS, CAROLE S Street Address (P.O. Box Number is Not Acceptable) 3815 N. US 1, STE, 106

City

(NOTE. Registered Agent signature required when reinstating)

COCOA FL 32926

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, typed or printed name of registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

(See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. XX Change ☐ Addition TITLE ☐ Delete TITLE JITTA, GUPTE JITTA. GUPTE NAME NAME 1931 N. CARPENTER ROAD STREET ADDRESS 1415 Garden SSt STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITUSVILLE FL 32796 Titusville, FL 32796 ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Celete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE 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 changed, or on an attachment with an address, with all other like empowered.

01/17/00