2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P98000079598 Apr 10, 2000 8:00 am Secretary of State 1. Entity Name VANOUCH, INC. 04-10-2000 90087 011 ***150.00 Principal Place of Business Mailing Address 3412 NIGHTHAWK COURT 3412 NIGHTHAWK COURT PUNTA GORDA FL 33950-6675 PUNTA GORDA FL 33950 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State APPLIED FOR Not Applicable 65-089 Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOESMANS, CAROLINE Street-Address (P.O. Box-Number-is-Not-Acceptable) 3412 NIGHTHAWK COURT PUNTA GORDA FL 33950 Zip Code City 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 DATE 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. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITI F Addition THILE Delete **BOESMANS, CAROLINE** NAME NAME STREET ADDRESS STREET ADDRESS 3412 NIGHTHAWK COURT CITY-ST-ZIP CITY-ST-ZIP **PUNTA GORDA FL 33950** ☐ Addition ☐ Change ☐ Delete TITLE TITLE **BOESMANS, JOHN** NAME 3412 NIGHTHAWK COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP **PUNTA GORDA FL 33950** Addition ☐ Change ☐ Delete TITLE BOESMANS, VANESSA NAME STREET ADDRESS 3412 NIGHTHAWK COURT STREET ADDRESS PUNTA GORDA FL 33950 CITY_ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE **BOESMANS, ANOUCHKA** NAME STREET ADDRESS 3412 NIGHTHAWK COURT STREET ADDRESS CITY-\$T-ZIP **PUNTA GORDA FL 33950** CITY-ST-ZIF TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-Z!P CITY-ST-ZIP ☐ Change Addition Delete TITLE 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.

TPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CAROLINE BOESMANS

941 5032139 Paylume Phone # CUEE034 (3/33