2000 UNIFORM BUSINESS REPORT (UBR)

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

ED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

DOCUMENT # P98000080944 Apr 20, 2000 8:00 am Secretary of State SEGARRA ENTERPRISES, INC. 04-20-2000 90107 012 ***150.00 Mailing Address Principal Place of Business 3856 1ST AVE. NORTH 3856 1ST AVE. NORTH ST. PETERSBURG FL 33713-8315 ST. PETERSBURG FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEI Number City & State 59-3536573 Not Applicable \$8.75 Additional Country Zip 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 SEGARRA, STEVEN T Street Address (P.O. Box Number is Not Acceptable) 3856 1ST AVE. NORTH ST. PETERSBURG FL 33713 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition PD ☐ Delete TITLE TITLE SEGARRA, STEVEN T NAME STREET ADDRESS STREET ADDRESS 3856 1ST AVE. NORTH CITY-ST-ZIP CITY-ST-7IP ST. PETERSBURG FL 33713 [] Change ☐ Addition Delete TITLE TITLE GERMAIN, SALVADOR T ST. NAME NAME STREET ADDRESS STREET ADDRESS 3856 1ST AVE. NORTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33713 ☐ Addition ☐ Change ☐ Delete TITLE TITLE SEGARRA, MARGARET T NAME NAME STREET ADDRESS STREET ADDRESS 3856 1ST AVE. NORTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33713 Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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