FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90623 020 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000082472

Entity Name
GROUP MEYER CORPORATION

Principal Place of Business: 6614 Pamela Lane West Palm Beach Fl 33405

Mailing Address: 6614 Pamela Lane West Palm Beach Fl. 33405

659269

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip | Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip | Country

4. FEI Number 65-0870506 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FIELDS, GARY D
STE 700
4400 PGA BLVD
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name: ROXANA BAZA
Street Address (P.O. Box Number Is Not Acceptable): 6614 PAMELA LANE
City: W. PALM BEACH FL Zip Code 33405

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: ROXANA BAZA, SECRETARY — 04/30/01
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 Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! FEE IS $150.00 After May 1, 2001 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MEYER, SELMA	NAME	
STREET ADDRESS	6614 PAMELA LANE	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33405	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MEYER, OSCAR	NAME	
STREET ADDRESS	6614 PAMELA LANE	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33405	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	D - SECRETARY/VICE PRES. ☐ Change ☑ Addition
NAME		NAME	ROXANA BAZA
STREET ADDRESS		STREET ADDRESS	6614 PAMELA LANE
CITY-ST-ZIP		CITY-ST-ZIP	WEST PALM BEACH, FL. 33405
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		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	☐ Change ☐ 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Selma Meyer — 04/30/01 (561) 582-0463
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #