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Jul 09, 2002 8:00 am

Secrétary of State

07-09-2002 90021 010 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

P98000086930 DOCUMENT

1. Entity Name

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

ELEMENTAL INVESTMENT CO INC

Principal Place of Business Mailing Address 2164 GENOVA DRIVE 2164 GENOVA DRIVE OVIEDO FL: 32765-7226 OVIEDO FL 32765-7226 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3537644 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MASSAR, MARC Street Address (P.O. Box Number is Not Acceptable) 2164 GENOVA DRIVE OVIEDO FL 32765-7226 City 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ■ Addition MASSAR, MARC NAME 2164 GENOVA DR STREET ADDRESS STREET ADDRESS **OVIEDO FL 32765** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY:ST-ZIP CHTY=ST=7tP+ TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition

NAME

STREET ADDRESS

CITY-ST-7IP

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.

P98000086930 MARC MASSAR Phone: (407) 349-2222 2164 Genova Drive Fax: (407) 349-2223 Oviedo, FL 32765 119840 July 3 02 Division of Corporations Uniform Business Report Filings PO BOX 1500 Tallahassee, FL 32302-1500 I did not receive the prior notice. Chack For \$150 + signed form enclosed. Thank you. Mor Mon Marc Massar-President Elemental Investment Co. Inc.