2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 13, 2001 8:00 am Secretary of State 01-13-2001 90003 023 ***150.00 DOCUMENT # P98000092352 1. Entity Name THE OUTLER GROUP, INC. Principal Place of Business Mailing Address 2700 SW 46TH AVE 2700 SW 46TH AVE WEST HOLLYWOOD FL 33023-4351 WEST HOLLYWOOD FL 33023-4351 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0896251 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent OUTLER, GAY F Street Address (P.O. Box Number is Not Acceptable) 2700 SW 46TH AVE WEST HOLLYWOOD FL 33023-4351 Zip Code City FL 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 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 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (10/00) Change ☐ Addition ☐ Delete TITLE NAME OUTLER, GAY F STREET ADDRESS STREET ADDRESS 2700 SW 46TH AVE CITY-ST-ZIP CITY-ST-ZIP WEST HOLLYWOOD FL 33023-4351 ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP ☐ Addition [] Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE 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 changed, or on an attachment with an address, with all otherwise empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

SIGNATURE: 🗻

NAME

STREET ADDRESS

SIGNATURE AND TYPED PROSPECTO NAME OF SIGNING OFFICER OR DIRECTO

☐ Delete

Drugy 7, 2001 (954)987-1

☐ Change

☐ Addition