2000 UNIFORM BUSINESS REPORT (UBR) FILED May 31, 2000 8:00 am DOCUMENT # P98000094778 1. Entity Name Secretary of State TEAGUE INVESTMENTS, INC. 05-31-2000 90102 018 \*\*\*150.00 Principal Place of Business Mailing Address 4100 STAGHORN LANE 4100 STAGHORN LANE WESTON, FL 33331 WESTON, FL 33331 00057715 2. Principal Place of Business 3. Mailing Address 810 Gateshead Court 11309 Knot Way Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Southlake, TX 65-0908575 Cooper City, Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33026 U.S.A. U.S.A. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CONSUE A TEAGUE Tara DiPasquale Street Address (P.O. Box Number is Not Acceptable) 11309 Knot Way 4100 STAGHORN LANE WESTON, FL 33331 33026 Cooper City for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE 9. This corporation is eligible to satisfy its Intangible FILE NOWIII FEE IS \$150,00 10. Election Campaign Financing Tax filling requirement and elects to do so. \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE CR2E034 (9/99 M Change NAME CONSUELA TEAGUE NAME Consuela Teague STREET ADDRESS 4100 STAGHORN LANE STREET ADDRESS 810 Gateshead Court CITY-ST-ZIP CITY-ST-7IP WESTON, FL 33331 Southlake, TX Delete TITLE Change Change Addition NAME GEORGE TEAGUE . George Teague STREET ADDRESS STREET ADDRESS 810 Gateshead Court 4100 STAGHORN LANE CITY-ST-ZIP CITY-ST-ZIP 76092 Southlake, WESTON, FL -33331 TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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 Change Addition 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: RE AND TYPED OR PRINTED NAME