2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empor

SIGNATURE:

FILED DOCUMENT # **P98000095398** Apr 07, 2000 8:00 am Secretary of State 1. Entity Name THE WARFIELD GROUP, INC. 04-07-2000 90002 020 ***150.00 Principal Place of Business Mailing Address 741 NW 37TH ST. 741 NW 37TH ST. FT. LAUDERDALE FL 33309-5059 FT. LAUDERDALE FL 33309 3. Mailing Address 2. Principal Place of Business 741 NW 37Th 87 741 NW 37th ST DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0874398 Ft. LAUNTRIME Not Applicable Ft. LAND, F Country Country \$8.75 Additional 5. Certificate of Status Desired 33309 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REYNOLDS, DOUGLAS H Street Address (P.O. Box Number is Not Acceptable) 4875 N. FEDERAL HWY., 10TH FLOOR FT. LAUDERDALE FL 33308 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. 7R2F034 (9/99) **PVTS** TITLE GEM SALES Addition TITLE Delete EDWARD WARFIELD WARFIELD, HEATHER A NAME NAME 741 NW 37 TH ST STREET ADDRESS 741 NW 37TH ST. STREET ADDRESS Pt. LAUDIFI 33309 CITY-ST-7IP CITY-ST-ZIP FT. LAUDERDALE FL 33309 ☐ Addition Change Delete TITLE WARFIELD, HEATHER A NAME STREET ADDRESS STREET ADDRESS 741 NW 37TH ST. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33309 Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [] Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete DITE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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