2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

Mar 19, 2001 8:00 am DOCUMENT # **P98000100301 Secretary of State** SOMBRERO PROPERTIES, INC. 03-19-2001 90442 025 ***150.00 Principal Place of Business Mailing Address 2975 OVERSEAS HWY 2975 OVERSEAS HWY MARATHON FL 33050 MARATHON FL 33050 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 65-0912714 Not Applicable 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 Name MILLER, ROBERT K Street Address (P.O. Box Number is Not Acceptable) 2975 OVERSEAS HWY MARATHON FL 33050 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. 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. 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition Change MILLER, ROBERT K NAME NAME STREET ADDRESS 2975 OVERSEAS HWY STREET ADDRESS CITY-ST-ZIF MARATHON FL 33050 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition COOREY, EDWARD T NAME NAME STREET ADDRESS STREET ADDRESS 98 DUNVEGAN WOODS CITY-ST-ZIP CITY-ST-ZIP HAMPTON NH 03842 TITLE Detete TITLE ☐ Change ☐ Addition CONWAY, GEORGE NAME NAME STREET ADDRESS 2975 OVERSEAS HIGHWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARATHON FL 33050 TITLE ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ 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-7IP 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 receipt of histee 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 attacking it by they address, with all other like empowered.

EDWARD T. COOREY

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR