

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000001368**

1. Entity Name

305-672-9200 MANAGEMENT, INC.**FILED**
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90027 044 ***158.75

016896

Principal Place of Business

**235 LINCOLN ROAD, SUITE 204
MIAMI BEACH FL 33139**

Mailing Address

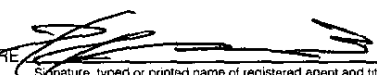
**235 LINCOLN ROAD, SUITE 204
MIAMI BEACH FL 33139**2. Principal Place of Business
437 41st St.3. Mailing Address
437 41st St.Suite, Apt. #, etc.
200Suite, Apt. #, etc.
200City & State
Miami Beach, FLCity & State
Miami Beach, FLZip
33140Country
USAZip
33140Country
USA4. FEI Number **65-0884467**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****CACTUS HOLDINGS
234 LINCOLN ROAD #204
MIAMI BCH FL 33139****7. Name and Address of New Registered Agent**Name
Cactus Holdings, LLC
Street Address (P.O. Box Number is Not Acceptable)
437 41st St. #210
Miami Beach, FL 33140
City **FL** 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  **M/Cactus Holdings, LLC 4/25/01**

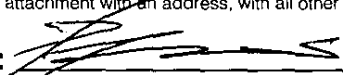
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees**11. OFFICERS AND DIRECTORS**TITLE **D** ☒ Delete
NAME **SCHMITT, R S**
STREET ADDRESS **235 LINCOLN ROAD, SUITE 204**
CITY-ST-ZIP **MIAMI BEACH FL 33139**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☒ Change ☐ Addition
NAME **437 Arthur Godfrey RD**
STREET ADDRESS **Miami Beach, FL 33140**
CITY-ST-ZIP **D Schmitt, RS**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: **D. 4/25/01****305-672-9200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)