2001 UNIFORM BUSINESS REPORT (UBR)

Feb 21, 2001 8:00 am Secretary of State DOCUMENT # P99000001577 1. Entity Name Ronvil I, Inc. 02-21-2001 90197 002 ***150.00 Mailing Address Principal Place of Business 626049 2. Principal Place of Business 3. Mailing Address 8087 Monetary Drive Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE UniteF-1 City & State City & State 4. FEI Number Applied For Not Applicable <u>Riviera Beach,</u> 65-0896504 \$8.75 Additional Country Zip Country 5. Certificate of Status Desired . Fee Required -_. · 33404 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent M. Chris Edwards Street Address (P.O. Box Number is Not Acceptable) 1001 N. US Highway One, Ste. 400 33477 Jupiter 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 M CHRIS EDWARDS yped or printed name of registered agent and title if applicable. -FILE NOW!!!-FEE:IS-\$150.00-----9. This corporation is eligible to satisfy its Intangible -- is 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) □k Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE PD NAME Ronald J. Costello STREET ADDRESS STREET ADDRESS 8087 Monetary Dr., Unit F-1 CITY-ST-ZIP. CITY-ST-ZIP Riviera Beach, FL 33404 ☐ Delete TITLE ST NAME NAME Vilma Costello STREET ADDRESS STREET ADDRESS 8087 Monetary Dr., Unit F-1 CITY-ST-ZIP CITY-ST-ZIP Riviera-Beach,-FL-33404~ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE. ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE 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

RONALD J COSTELLO

with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: .

FILED