UNIFORM BUSINESS REPCRT (UBR) May 24, 2001 8:00 am Secretary of State NT# P99000001926 5000 Real Estate Investment Group INC 05-24-2001 90502 037 ***158.75 Principal Place of Business Mailing Address 10077 CHESHUNT Dr. 10077 CHESTIVAT Un. Orlando 1=1a 52817 Oxlando Flo. 32817 A0071764 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 59-355-1698 Not Applicable $Z_{\rm ID}$ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SUJD, RUBERT Street Address (P.O. Box Number is Not Acceptable) 10077 CHESHUNT DR. OKIANDO 176. 32817 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its egistered 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 After MAY 1, 200 (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 Payabl 1 to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete ☐ Change Addition ROBELT SOJO NAME STREET ADDRESS 10077 CHESKUNT UL. STREET ADDRESS CJTY-ST-ZIP UK! F4.32817 CITY-ST-ZIP ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete ☐ Change ☐ Addition MANAE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ☐ Defete Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

10 whom it may concern :

When I met with my Accountant, she ask it I had send the unitarn Quincis Report.

I had told her I had not receive one. So.

I called on 5/9/01 and requested for a

Born to send to me. I had gooken to Thumpton
on 5/4/01. That the only reason is going take.

isnderstarding,

Rosent Sono