2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000009080 Jul 20, 2000 8:00 am 1. Entity Name **Secretary of State** HAROLD WORD, INC. 07-20-2000 90009 020 ***150.00 Principal Place of Business Mailing Address 6758 CISCO GARDEN RD EAST 6758 CISCO GARDEN RD EAST JACKSONVILLE FL 32219 JACKSONVILLE FL 32219 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt, #, etc. 4. FEI Number Applied For City & State City & State 59-3556022 Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WORD, HAROLD Street Address (P.O. Box Number is Not Acceptable) 6758 CISCO GARDEN RD EAST JACKSONVILLE FL 32219 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 \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 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. ☐ Delete Paes. Addition TITLE TITLE HARDIA WORD GARDEN RDE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE F1 CITY-ST-ZIP 32219 ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete NAME . STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME 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 changed, or on an attactment with an address, with all other like empowered.

EXPEDITED SERVICES

6758 CISCO GARDEN ROAD EAST - JACKSONVILLE, FL 32219 Phone 904-781-2911 ~ Fax 904-781-2914

B0103472

July 14, 2000

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

To Whom It May Concern,

This is the first year of incorporation and I was unaware that I had to file an annual report for the Uniform Business report. I received the second notice and enclosed is a check for 150.00. If you have any questions I can be reached at 904-781-2911.

Sincerely,

Harold Word