2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000018564 Sep 15, 2000 8:00 am Secretary of State STEALS AND DEALS, INC. 05-04-2000 90035 001 ***300.00 09-15-2000 90007 002 ***550.00 Principal Place of Business Mailing Address 2100 CONSTITUTION BLVD. 2100 CONSTITUTION BLVD. SARASOTA FL 34231 SARASOTA FL 34231 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 650901856 Not Applicable Zip Country Zip 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 EHLERT, GARY P Street Address (P.O. Box Number is Not Acceptable) 2100 CONSTITUTION BLVD. SARASOTA FL 34231 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 . 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be Election Campaign Financing 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME EHLERT, GARY P NAME STREET ADDRESS 2100 CONSTITUTION BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34231 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Chance Addition NAME ::L: ADDRESS STREET ADDRESS ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE NAME #RDDF00 STREET ADDRESS ST-ZIP CITY-ST-ZIP 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 at other like impowered. changed, or on an attachment with an address, with

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Signa SIGNATURE AND TYPED OR PRINTED NAMED