2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 28, 2000 8:00 am Secretary of State DOCÚMENT # **P99000018764** BRISTOL CAPITAL, INC. 04-28-2000 90053 023 ***150.00 Mailing Address Principal Place of Business २वंबर PALM BEACH LAKES BLVD., STE. 220 2447 PALM BEACH LAKES BLVD., STE. 220 W. PALM BEACH FL 33409-4029 W. PALM BEACH FL 33409 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 3131 Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PROUTY, RANDALL % BRISTOL CAPITAL, INC. 2447 PALM BEACH LAKES BLVD., STE. 220 W. PALM BEACH FL 33409 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 ed agent and title if applicable 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, 2000 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 Payable to Department of State ADDITION ENOUGH AND DIRECTOR SAND DIRECTOR SAND 11. OFFICERS AND DIRECTORS 12 Kane Hoffman Dantagout TITLE ☐ Delete TITLE PROUTY, RANDALL NAME 1101 Brickell Ave, Suite M-101 NAME 2447 PALM BEACH LAKES BLVD., STE. 220 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33409 Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ■ Addition ☐ Delete TITLE 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 attachment with an address, with all other like empowered.

SIGNATURE: