2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P99000021829 **DOCUMENT #**

1. Entity Name



FILED Mar 03, 2003 8:00 am Secretary of State 03-03-2003 90967 005 ***158.75

| TRACEE'S DANCIN' STARZ, INC | | | | | | | | |
|---|-------------------------------|---------------------|---------------------------------------|------------------------------------|--|---------------------------------|--------------------------|---------------------------|
| Principal Place of Business 5630 YAHL ST UNIT 1 & 2 NAPLES FL 34109 | 5630 Yı UNIT 1 | | | | | | | |
| 2. Principal Place of Business | 3. Mailin | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | Suite, | Suite, Apt. #, etc. | | | ☐ CHECK HERE IF MAKING CHANGES | | | |
| City & State | City & | City & State | | | 4. FEI Number 59-3564921 | | | oplied For |
| Zip Country | Zip | · | Country | | 5. Certificate of State | us Desired | \$8.75 Ad Fee Require | ot Applicable ditional |
| 6. Name and Address of C | urrent Registered | Agent | | | 7. Name and Addre | ss of New Registered | | <u>.</u> |
| FRANK SAN T | | | Name | | | | | |
| FRANK, ANN T 2124 AIRPORT-PULLING ROAD SOU | | Street Address (| | P.O. Box Number is Not Acceptable) | | | | |
| NAPLES FL 34112 | | | City | | | FL | Zip Coc | e |
| 8. The above named entity submits this stater | ment for the purpos | e of changing its | registered office of | or registere | ed agent, or both, in the | | familiar with | and accept |
| the obligations of registered agent: | , , | 3.3 | - J | | | o otato o i pionadi. Tami | earmer with | and docept |
| Signature, typed or printed name of registere | ed agent and title if applica | ble. (NOT | E: Registered Agent signa | sture required v | when reinstating) | DATE | · | |
| FILE NOW!!! FEE IS \$150.0 After May 1, 2003 Fee will be \$55 Make Check Payable to Florida Departm | 50.00 | | 7746 | | | ampaign Financing Contribution. | | 0 May Be I to Fees |
| | S AND DIRECTORS | | 11. | | ADDITIONS/CHANC | SES TO OFFICERS AND | DIRECTOR | S IN 11 |
| Delete BRANN, TRACEY BRANN, TRACEY 692 LAMBTON 2N 2 1 5 0 0 Ber | | | TITLE NAME STREET ADDRESS | P BRA 215 | ANNITRACEY SUO BERWHICK RUN | | Change Change | ☐ Addition |
| CITY-ST-ZIP NAPLES FL 34104 | | _ | CITY-ST-ZIP | | ERO, FL | 33928 | | |
| NAME BRANN, JEFF STREET ADDRESS CITY-ST-ZIP NAPLES FL 34104 | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2150 | NN, JEFF O BERWHICE ERO, FL 3 | | ⊠ Change | ☐ Addition |
| ITTLE NAME STREET ADDRESS CITY-ST-ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | Change | Addition |
| TILE IAME STREET ADDRESS STY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | Change | Addition |
| VITLE VAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | , <u>, , , , , , , , , , , , , , , , , , ,</u> | //-VA | ☐ Change | Addition |
| ITLE IAME TREET ADDRESS | | ☐ Delete | TITLE NAME STREET ADDRESS | | ************************************** | | ☐ Change | ☐ Addition |

SIGNATURE:

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

6466