2001 UNIFORM BUSINESS REPORT (UBR) May 22, 2001 8:00 am Secretary of State DOCUMENT # P99000023950 1. Entity Name COUNTERBALANCE INVESTMENTS, INC. 05-22-2001 90058 036 ***150.00 Principal Place of Business Mailing Address 4200 Vinkemulder Road Coconut Creek, Fl, 33073 770768 2. Principal Place of Business 812 SE 8th Ave. 3. Mailing Address 812 SE 8th Ave. Suite, Apt. #, etc. Suite, Act. #, etc. DO NOT WRITE IN THIS SPACE eerfield Bch, Florida Deerfield Beach, Florida FEI Number 65-0951906 Applied For Not Applicable Country USA 3³3441 ^{Zip}33441 Country USA \$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 Shahrukh Dhanji Street Address (P.O. Box Number is Not Acceptable) 812 SE 8 Avenue Deerfield Beach, Florida. 33441 Zio 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 Squature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOWIFFEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees lake Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (11/00) ☐ Delete TITLE Addition MALAC NAME Dhanji, Shahrukh STREET ADDRESS :812 SE 8th_Avenue STREET ADDRESS CITY - ST - ZIP Deerfield Beach, Fl. 33441 TITLE Change ■ Addition ☐ Delete NAME NAME Shah, S. Shah STREET ADDRESS 812 SE 8th Avenue and SI-ZPDeerfield Beach, F1. STREET ADDRESS CITY ST ZP 33441 ☐ Delete TITLE Addition TITLE D Esposito, Greg NAME STREET ADDRESS 12 SE 8 AVE STREET ADDRESS cmy star Deerfield Beach, Fl. 33441 CITY - ST-ZIP Delete Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS City-St-ZiP CITY-ST-ZIP ☐ Delete ITTLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADURESS CITY ST. 7IP CITY-ST-ZIP TITI F ☐ Change ☐ Addition Deteta NAME MALE STREET ADORESS STREET ADDRESS CITY - ST - 719 CITY - ST-71P 13. 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 eath; 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: