FILED **2001 UNIFORM BUSINESS REPORT (UBR)** May 16, 2001 8:00 am Secretary of State DOCUMENT # P99000027606 1. Entity Name 05-16-2001 90262 039 ***150.00 BRADCO ENTERPRISES, INC. Mailing Address Principal Place of Business 6075 SW 72 STREET STE 400 1003 NW 16 PL AUUUJUUA STUART FL 34994 MIAM! FL 33143 2. Principal Place of Business 3. Mailing Address Heather CT. 3000 N.E. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0949673 Florida esson Not Applicable lenson beau 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 PAYNE, CARROLL L Street Address (P.O. Box Number is Not Acceptable) 6075 SW 72 STREET STE 400 **MIAMI FL 33143** 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. П Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PUSD Addition **PVSD** → Change ☐ Delete TITLE TITLE matericus, Richard A. NAME NAME MATTHEWS, RICHARD A 3000 NE HEATHER CT STREET ADDRESS STREET ADDRESS 6075 SW 72 STREET STE 400 Jersen Black FL 34957 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33143** TITLE ► Change Addition Delete Matthews. Diana L NAME MATTHEWS, DIANA L 3000 NE Heather CT STREET ADDRESS STREET ADDRESS 6075 SW 72 STREET STE 400 Jerson Beach, FL 34957 CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33143 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

Richard A MA Hhers (Pres)

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIF

NAME

☐ Change

☐ Addition