2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am § Secretary of State DOCUMENT # P99000047221 05-16-2001 90038 036 ***150.00 ANGLO AMERICAN HOLDINGS, INC. Principal Place of Business Mailing Address 124 NE 5TH AVE 124 NE 5TH AVE DELRAY BEACH FL 33483 **DELRAY BEACH FL 33483** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0922108 Not Applicable Zip Country 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 MARSH, M. MARK Street Address (P.O. Box Number is Not Acceptable) 124 NE 5TH AVE **DELRAY BEACH FL 33483** 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 Signature, typed or printed name of registered agent and title if applicable. DATE (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. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change ☐ Addition TITLE Delete TITLE NAME BRIDES, DIGBY C NAME STREET ADDRESS STREET ADDRESS 124 NE 5TH AVE CITY-ST-ZIP CITY-ST-ZIP **DELRAY BEACH FL 33483** TITLE Delete Change ☐ Addition NAME MARSH, M. MARK STREET ADDRESS STREET ADDRESS 124 NE 5TH AVE CITY-ST-ZIP CITY-ST-ZIP **DELRAY BEACH FL 33483** TITLE SD Delete TITLE ☐ Change ☐ Addition NAME CARMO, DAVID NAME STREET ADDRESS STREET ADDRESS 124 NE 5TH AVE CITY-ST-ZIP CITY-ST-7/P **DELRAY BEACH FL 33483** ☐ Change TITLE Delete TITLE ☐ Addition NAME CARMO, JAMES NAME STREET ADDRESS STREET ADDRESS 124 NE 5TH AVE CITY-ST-ZIP CITY-ST-ZIP **DELRAY BEACH FL 33483** TITLE TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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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 of trustee empower of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

changed, or on an attachmer

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SIGNATURE AND TYPE NTED NAME OF SIG PPIDGES

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