7. 2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 14, 2000 8:00 am Secretary of State DOCUMENT # P99000055068 - 1. Entity Name 07-12-2000 90004 007 ***150.00 Mailing Address 2071 Venezian way 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE FEI Number 59-3581201 City & State City & State Applied For Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent -----6. Name and Address of Current Registered Agent WOOD'S, Jonathan D Esq. Street Address (P.O. Box Number is Not Acceptable) W. Church ST Str 201 City orlando Pla 32801 Zip Code FL 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 \$5,00-May Be -10._Election:Campaign.Financing. Tax filling requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State: (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. (66/6)Delete TITLE Change ☐ Addition TITLE President NAME NAME mark L Wood **CR2E034** STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 2011 benezion line ☐ Change ☐ Addition MLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME 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-2IP Change ■ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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:

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Annual Reports Section:

As per your request, I have mailed a second copy of the letter that Was mailed along with my UBR report, which for the reasons listed Below was mailed late.

When I changed my business name from Wood Financial Services
To Mark L. Wood P.A. I incurred a lot of problems. I was given
Two FEI numbers and I never received a UBR report under Mark L. Wood P.A.
When I called your office and told them of this situation, another report
Was to be mailed to me. I was instructed to mail in the report with the
\$150 along with an explanation, which is what I did.

The correct FEI # is 59-3581201

Thank You,_

Mark L. Wood