2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 13, 2001 8:00 am DOCUMENT # P99000059632 **Secretary of State** 1. Entity Name LABOURWORKS, INC. 02-13-2001 90024 023 ***150.00 Principal Place of Business Mailing Address 7770 COUNTRY PL. 7770 COUNTRY PL. WINTER PARK FL 32792 WINTER PARK FL 32792 C0020278 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3615363 Not Applicable Zip Country 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 ليدم سري ريان ب HOOKS, RICHARD Street Address (P.O. Box Number is Not Acceptable) 7770 COUNTRY PL. WINTER PARK FL 32792 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. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 11. OFFICERS AND DIRECTORS 12. TIT! F **PSTV** Delete TITLE Change HOOKS, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 7770 COUNTRY PL. CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32792 Delete Change Addition TITLE NAME HOOKS, RICHARD NAME STREET ADDRESS STREET ADDRESS 7770 COUNTRY PL. CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32792 TITLE ☐ Change Addition TITLE ☐ Delete NAME -NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Addition Delete 1IILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Change Addition 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: