page 1 of 2

2001 UNIFORM BUSINESS REPORT (UBR)

[redacted]

P99000060332

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

DOCUMENT # P99000060332

1. Entity Name

OAKWOOD CREMATION SERVICES, INC.

Principal Place of Business	Mailing Address
167 NE 26 STREET MIAMI FL 33137	P.O. BOX 498 FT. LAUDERDALE FL 33302

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

08/29/01 01013 021 165.00

4. FEI Number 65-0991578 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALMAN, MARTIN 17290 NE 19 AVENUE N MIAMI BEACH FL 33162	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 ______ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution: ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEELE, BOBBY L 167 NE 26 STREET MIAMI FL 33137 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 178

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: Bobby Leroy Steele Jr. BOBBY L, STEELE APRIL 30, 2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)

Page 2 of 2

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OAKWOOD CREMATION SERVICES, INC.

E.I.N. #65-0991578

167 NE 26 STREET
MIAMI, FL 33137

P.O. BOX 408
FT. LAUDERDALE FL 33302

[redacted]

APPLIED FOR

$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent:

JOHN GEORGE
409 S,E. 7th STREET
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent:

FL

FOR THE FIRM

FILE NOW!!! FEE IS $560.00
After September 12, 2001 Fee will be $750.00
Make Check Payable to Department of State

$5.00 Filing Fee & Certified Copy Additional Copy Fee(s)

DEOGRACIO JOHN MALDONADO
167 N.E. 26th STREET
MIAMI FL 33137

SIGNATURE: Deogracio J. Maldonado

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR