2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 31, 2001 8:00 am Secretary of State DOCUMENT # P99000069127 THE CONTINENTAL GROUP - NAPLES, INC. 01-31-2001 90189 034 ***150.00 Principal Place of Business Mailing Address 2950 N. 28TH TERR. 2950 N. 28TH TERR. HOLLYWOOD FL 33020 HOLLYWOOD FL 33021 A0016267 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHATZ, RICHARD E Street Address (P.O. Box Number is Not Acceptable) STEARNS WEAVER MILLER WEISSLER, ET AL 2200 MUSEUM TOWER, 150 W. FLAGLER ST. **MIAMI FL 33130** City 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. (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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE ☐ Addition TITLE STRUNIN, RICHARD NAME NAME STREET ADDRESS 2950 N. 28TH TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAMÉ GOMBERG, GENE NAME STREET ADDRESS STREET ADDRESS 2950 N. 28TH TERR. CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 $D \lor P$ TITLE ☐ Delete TITLE Change Change ☐ Addition NAME NAME ROSES, TOMAS STREET ADDRESS STREET ADDRESS 2950 N. 28TH TERR. CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Delete Change TITLE ☐ Addition TITLE NAME CHRISTENSEN, STEVEN J NAME STREET ADDRESS STREET ADDRESS 2950 N 28TH TERRACE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 empowered.

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR