2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 16, 2000 8:00 am DOCUMENT # **P99000070163 Secretary of State** BALLS OF STEEL, INC. 03-16-2000 90093 046 ***150.00 Principal Place of Business Mailing Address 3000 34TH STREET SOUTH 3000 34TH STREET SOUTH **STE 33** STE 33 ST PETERSBURG FL 33711-3820 ST PETERSBURG FL 33711-3821 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite Apt. #. etc. Suite, Apt. #, etc. 4. FEI Number 59-3590480 Applied For City & State City & State Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 3371-3821 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BERGER, ALAN Street Address (P.O. Box Number is Not Acceptable) 3000 34TH STREET SOUTH **STE 33** ST PETERSBURG FL 33711-3820 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 DATE 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 After MAY 1, 2000 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 12. 11. Dresidant ☐ Delete TITLE TITLE NAME BERGER NAME 34TH ST. SOUTH, STE 33 STREET ADDRESS STREET ADDRESS 33711-3B21 CITY-ST-ZIP PETERSBURG CITY-ST-ZIP VP, See, Trees. TITLE ☐ Delete NAME NAME ST. SONTH, STE 33 STREET ADDRESS STREET ADDRESS 33711-3821 CITY-ST-7IP PETERS BURG CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Addition ☐ Delete TITLE 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-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME

13. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/00 727 866-63 ao