2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 19, 2001 08:00 AM DOCUMENT # P9900074217 1. Entity Name **Secretary of State** UGLY TUNA SALOONA OF MIAMI, INC. Principal Place of Business Mailing Address 7725 SW 40TH ST 4411 CLEVELAND AVENUE MIAMI FL FORT MYERS FL33155 33901 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0952862 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SIMEONE RICHARD SIMEONE RICHARD 436 S. ANDREWS AVE Street Address (P.O. Box Number is Not Acceptable) 4411 CLEVELAND AVENUE FORT LAUDERDALE FL33301 City Zip Code FT MYERS 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. 04/19/2001 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 \$5.00 May Be 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 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (11/00) ☐ Delete TITLE ☐ Addition X Change MAME LYNCH PAUL NAME LYNCH **PAUL** 4411 CLEVELAND AVENUE STREET ADDRESS STREET ADDRESS 4411 CLEVELAND AVENUE CITY-ST-ZIP FORT MYERS FL 33901 CITY-ST-ZIP FORT MYERS D ☐ Delete TITLE X Change NAME BRAWNER TERRY NAME BRAWNER TERRY STREET ADDRESS 4411 CLEVELAND AVENUE STREET ADDRESS 4411 CLEVELAND AVENUE CITY-ST-ZIP FORT MYERS FL 33901 CITY-ST-ZIP FORT MYERS FL33901 Delete TITLE DCEO X Change ☐ Addition LAGESCHULTE NAME LAGESCHULTE DAVID STREET ADDRESS 4411 CLEVELAND AVENUE STREET ADDRESS 4411 CLEVELAND AVENUE CITY-ST-ZIP FORT MYERS 33901 CITY-ST-ZIP FORT MYERS 33901 FL. TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition 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, with all other like empowered.

SIGNATURE: Paul-W. Lynch T 04/19/2001

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