DOCU 1. Entity Nan	<b>D UNIFORM BUS</b> MENT # <b>P990000</b> W BOY, INC.		P	(UBR)		Sec	FILEI 21, 2000 cretary 02 15-2000 90215 005	8:00 an f State	
Principal Place of Business 1657 NW 3RD AVE		Mailing Address 1657 NW 3RD AVE.							
MIAMI FL 3313	36	MIAMI FL 33136-1823					1		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			-	DO NOT WRITE IN THIS SPACE			
City & State		City & State				FEI Number		Applied For Not Applicable	
Zip	Country	Zip	Cour	ntry	_	Certificate of Status Desire	d		
	6. Name and Address of Current	Registered Agent		Name	7. 1	name and Address of New	w Registered Agent		
8ENNETT, DWAYNE				Name Street Addres	s (P.O. B	lox Number is Not Accepta	ıble)		
	NE 46TH ST MI FL 33136	<u></u>	ند <del>ما م</del> ر		4 10 1 m-		<u>مر</u> یند د <del>ور میرد</del> . 		
				City			FL Zip Co	ode	
8. The above	e named entity submits this statement to	r the purpose of changing its	register	ed office or regis	tered ag	ent, or both, in the State of	Florida.		
SIGNATURE									
	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registere	od Agent signature requ	ired when re	einstätiling)	DATE		
Tax filing	poration is eligible to satisfy its Intangible requirement and elects to do so, erla on back)	FILE NOW After MAY 1, 20 Make Check Payat	00 Fee			10. Election Campaign Trust Fund Contribu		.00 May Be ed to Foes	
11.	OFFICERS AND		12.		AD	DITIONS/CHANGES TO C			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESS dent Dwayne Hackman 20104N.W.2715 OPA Locka Fl. 33056						' 🗌 Change		
TITLE NAME STREET ADDRESS	DWAYNE BENNEH DWAYNE BENNEH 212N.E. 465t	Delete	TITLI NAM STRI	E			Change		
TITLE NAME STREET ADORESS CITY-ST-ZIP	Misam5-F1. 33137		TITL NAM STR	£	<u> </u>		Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-21P		C Delete		)			Change	Addition	
indicated of the co	certify that the information supplied with d on this report or supplemental report is xporation or the receiver or trustee empty d, or on an attachment with an address,	s true and accurate and that owered to execute this report	my signa : a <u>s</u> requi	けがら そわうり わういら け	ne same	lenal effect as it made und	er nam mari am an onic		
SIGNATURE:				adent	/	4125 bD	B50-222-	6953	
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