2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000076114

1. Entity Name

YOUR ELECTRONICS STORE, INC.

05-26-2000 90122 031 ***150.00

FILED

Jun 27, 2000 8:00 am Secretary of State

Principal Place of Business

Mailing Address

22016 PALM GRASS DRIVE

22016 PALM GRASS DRIVE

BOCA RATON FL 33428-4791 BOCA RATON FL 33428 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Numbe City & State City & State 65-094653 - Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GRESS, MARYANN Street Address (P.O. Box Number is Not Acceptable) **22016 PALM GRASS DRIVE BOCA RATON FL 33428** Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 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. Change ☐ Addition F. GRESSIP Delete TITLE TITLE NAME PALM GRASS DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE NAME 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 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Deleta TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME

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.

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

.. 149000076114 MODE DE COMP 4-30-00 306684 Dwision of Corporations attn: a Marager Dear Sir/Madam, I received this back in January of believe, and since then I've forwarded all mail to our accountant regarding your Electronies Store. If you've mailed reminders regarding the UBR he may have already spiled this or filed an ettersion if that's possible. anyway. I found this yesterday & felt I should fill it out is pend a check \$1,50.00 Back is november 99 we just wanted a Florida State toy number. Somehow after many phone calls, we texted up a corporation. We really didn twant that. My husband occasionally buys used ham radio equipment and sells it on E-BAY. He just wanted a tay number in case le bought seme new