2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

May 17, 2001 8:00 am DOCUMENT # P99000079989 Secretary of State 1. Entity Name 05-17-2001 91308 040 ***150.00 ROZ PALMIERE, INC. Principal Place of Business Mailing Address 3951 HAYNES CIRCLE 3951 HAYNES CIRCLE 658010 CASSELBERRY FL 32707 CASSELBERRY FL 32707 2. Principal Place of Business 3. Mailing Address 6297 LAKE CHARM CIRCLE 6297 LAKE CHARM CIRCL DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3595117 Applied For OVIEDO, FL oviedo, Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA 32765 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSLYN PALMIERE PALMIERE, ROSLYN Street Address (P.O. Box Number is Not Acceptable) 3951 HAYNES CIRCLE CIRCLE CASSELBERRY FL 32707 City DVIEDO 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. ROSLYN PALMIERE SIGNATURE . 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. 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 11. CR2E034 (10/00) PALMIERE, ROSLYN X 6297 LAKE CHARM CIRCLE 🛣 Change TITLE TITLE ☐ Delete PALMIERE, ROSLYN NAME NAME 3951 HAYNES CIRCLE STREET ADDRESS STREET ADDRESS OVIEDO, FL 32765 CASSELBERRY FL 32707 CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP 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

Attachment Gentelmen. 1658010 5. Lave tried on numerous. 5/1/01 occasions to file this on-line. I was successful on the other Corporation In involved in: Quality Appraisal Services Inc and I have called tech Support (850-487-6939) on numerous occasions since 4/10/01 togs trying to get both Corporation's UBR:15 filed. I give up and am mailing my fee. I understand a large "glut has occured on the internet. Thenh Jon in advance, Postyn Palmiere