2000 UNIFORM BUSINESS REPORT (UBR) FILED Jul 28, 2000 8:00 am Secretary of State DOCUMENT # P9900080091 SUNCOAST INVESTORS, INC. 07-28-2000 90146 014 ***150.00 Principal Place of Business Mailing Address 4017 GRAY STREET 4017 GRAY STREET **TAMPA FL 33609 TAMPA FL 33609** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ----City & State Applied For City & State 59-3631561 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CALVO, LAZARO Street Address (P.O. Box Number is Not Acceptable) **4017 GRAY STREET TAMPA FL 33609** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible =10: Election Campaign Financing **\$5:00** маў ве After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition TITLE ☐ Delete CALVO, LAZARO NAME **4017 GRAY STREET** STREET ADDRESS STREET ADDRESS TAMPA FL 33609 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE CALVO, JOE E NAME NAME 4017 GRAY STREET STREET ADDRESS STREET ADDRESS City-St-78 **TAMPA FL 33609** CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE 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.

1200008091 ATTACHMENT Tane FL 7/24/00 A-1009975 DIVISION OF COMPORATIONS. Oversan Business Report Filines. To Whom it may concern. I RECEIVED This votice to sile The Business Resort For Successf. Twestors Inc. mas my seconstruct Pointed out to me that this was A second wo tice AND that the rist notice was supposed to be 15000 I never Received The Frist Notice; he tolone to call the. Diversion of Consonations and Explain never Receiving The Frast Notice; I are call to any 7/24/00 AND Reform conversation with your office I am to Lo to write This Explanation and send A chek For the. 150,00 Fee. Thoukyou Surcosst Investors tae. LAZARO CALUO