2000 UNIFORM BUSINESS REPORT (UBR) FILED Jun 05, 2000 8:00 am **DOCUMENT#** FISH & AROUND, Inc. **Secretary of State** 06-05-2000 90002 011 ***150 00 Principal Place of Business 1500- N. Florida Mango Road West Palm Beach, Florida 33409 00052782 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Nason, YEAGER, Gerson, while + Lioce. P.A. SUTERA 1645- Alm Beach Lakes Blud. W.P.B. Florida 33401 33 V7 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. JOSEPH 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11 ☐ Addition Change PROSIDENT/SECRETORY TITLE TITLE □ Delete JOSEPH I SUTERA NAME NAME STREET ADDRESS STREET ADDRESS 1420- ocean way CITY-ST-ZIP CITY-ST-ZIP JUDITER, Horida ☐ Addition Change TITLE TREASURER ☐ Delete NAME NAME ADZAT OYNOFUA STREET ADDRESS STREET ADDRESS 701-5. Seas DRIVE Jupiter, Haida 33477 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete 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-7IP Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.