2001 UNIFORM BUSINESS REPORT (UBR) 05-23-2001 90206 001 *1:350.00 P99000095475 DOCUMENT # **P99000095475** SECREFARY OF STATE BIVISION OF CORPORATIONS KEY LARGO LEISURE ENTERPRISES, INC. 01 JUN 12 PM 1: 27 Principal Place of Business Mailing Address 2665 S. BAYSHORE DR., STE. 703 2665 S. BAYSHORE DR., STE, 703 MIAM) FL 33133 MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0957872 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WORLD CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2665 S. BAYSHORE DR., STE. 703 MIAMI FL 33133 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 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. ☐ Addition ☐ Change TITLE Delete TITLE MANAF NAME VAUDIN, PAUL E CR2E034 STREET ADDRESS STREET ADDRESS 2665 S BAYSHORE DR #703 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33133** ☐ Change Addition TITLE Oelete TITLE NAME YATES, GEORGE A NAME STREET ADDRESS STREET ADDRESS 2665 S BAYSHORE DR #703 CITY- \$1-71P CITY-ST-ZIP **MIAMI FL 33133** ☐ Addition TITLE ☐ Delete TITLE NAME YATES, DEBORAH S NAME STREET ADDRESS 2665 S BAYSHORE DR #703 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33133 ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Deleté TITLE TITLE NAME. NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IF 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 coperation of the ecceiver 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

Deborah S. Yates 4/23/01 (305)385-3931

SIGNATURE:

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