FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

SIGNATURE: \_\_

## Feb 13, 2001 8:00 am DOCUMENT # P99000100748 **Secretary of State** JAN 26 20 1. Entity Name AGNES B. ATLANTIC, INC. 02-13-2001 90573 008 \*\*\*150.00 Mailing Address Principal Place of Business C/O ABW ENTERPRISES, INC. 640 COLLINS AVENUE 920243 MIAMI BEACH FL 33139 79 GREENE STREET NEW YORK NY 10012 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0964514 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City Zip Code 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 \$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. 12. VICE - PRESIDENT TITLE TITLE ☐ Delete SWIFT, GREGORY 10 ABW ENTERPRISES INC. 79 GREENESS SWIFT, GREGORY NAME NAME STREET ADDRESS STREET ADDRESS ABW ENTERPRISES INC 79 GREENE ST CITY-ST-ZIP CITY-ST-ZIP YOKK NY. 10012 NEW YORK NY 10012 PRESIDENT - SOLE PIKATOK Change ETIENNE BOURGOIS TITLE ☐ Delete TITLE NAME NAME 17 RUE DIEU STREET ADDRESS do CAC STREET ADDRESS FRANCE 75010 CITY-ST-ZIP CITY-ST-7IP PAKIS . SECRETARY ☐ Delete TITLE TITLE ROGERS NAME NAME CHRISTINE ARNOLD 4 PORTER 399 PARK AVENUE STREET ADDRESS STREET ADDRESS NEW YORK NY 10022-4690 ASSISTANT - SELKETAKY Change CITY-ST-ZIP CiTY-ST-ZIP ☐ Change ☐ Addition ASSISTANT TITLE ☐ Delete TITLE CECILE PLUVINAGE NAME NAME do ABW ENTERPRISES INC. 79 GREENE ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME 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

ASSISTANT SEC. GETTE PLUTINAGE 01/27/201 (24) 548970