## 2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P99000100945 May 19, 2000 8:00 am Secretary of State 1. Entity Name LIP SMACKERS SANDWICH SHOPS INC. 05-19-2000 90074 048 \*\*\*150.00 Mailing Address Principal Place of Business 2517 EAST LAS OLAS BLVD. 2517 EAST LAS OLAS BLVD. FORT LAUDERDALE FL 33301-1517 FORT LAUDERDALE FL 33301-1517 Principal Place of Business 3.: Mailing Address DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 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 CAN-AM IMMIGRATION SERVICES INC. Street Address (P.O. Box Number is Not Acceptable) SUITE 100 2500 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33305 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 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 TITLE ☐ Delete SINGER, JACK NAME NAME 11 HEARTDALE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TORONTO, ONTARIO, CANADA M6G -1M7 ☐ Addition Singer verde TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KATUNI Addition TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

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SIGNATURE SISSING TACK SINGEL Presi

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ger President April 70/00 292-76