FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 17, 2002 8:00 am Secretary of State S04346 DOCUMENT # 05-17-2002 90030 009 ***150.00 NATIONAL AUCTION SALES COMPANY, INC. Mailing Address Principal Place of Business 1325 S CONGRESS AVE 1325 S CONGRESS AVE HAIAAAA STF 204 **STE 204** BOYNTON BCH. FL 33426 BOYNTON BCH. FL 33426 US 3. Mailing Address 2. Principal Place of Business 1325 S Congress Ave 1325 S Congress Ave Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE. Suite, Apt. #, etc. Suite 202 Suite 202 Applied For City & State City & State 65-0231538 Not Applicable Boynton Beach FL Boynton Beach, FL Country \$8.75 Additional Zip · Country 5. Certificate of Status Desired Fee Required 33426 33426 US US 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Richards, George L - RICHARDS, GEORGE L. -- -Street Address (P.O. Box Number is Not Acceptable) 1325 S Congress Ave 1325 S CONGRESS AVE **STE 204** Suite 202 **BOYNTON BCH. FL 33426** Zip Code 33426 City Boynton Beach 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS CR2E034 (9/01) Change ☐ Addition TITLE ☐ Delete SOUKUP, CHARLES J. NAME NAME 1325 S CONGRESS AVE STREET ADDRESS STREET ADDRESS BOYNTON BCH. FL CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE RICHARDS, GEORGE L. NAME NAME 1325 S CONGRESS AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME

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 reperce or dustee 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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

SIGNATURE:

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Change Change

☐ Addition