2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 30, 2001 8:00 am Secretary of State **DOCUMENT # \$49694** 1. Entity Name A.G. ROYCE METAL MARKETING CORPORATION 01-30-2001 90010 046 ***150.00 Principal Place of Business Mailing Address 3317 NW 10 TERRACE P.O. BOX 100527 **STE 409** FORT LAUDERDALE FL 33310 FORT LAUDERDALE FL 33309 US 2. Principal Place of Business 3. Mailing Address 4208 NORTH 31 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State HoLLYwain City & State 4. FEI Number Applied For 65-0263489 Not Applicable 33021 Country \$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 GORDON, BRIAN Street Address (P.O. Box Number is Not Acceptable) 3317 N.W. 10TH TERRACE SUITE 409 FT. LAUDERDALE FL 33309 Zip Code FL 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 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PCSD** TITLE ☐ Delete C\$1) TITLE Change : Addition GORDON, BRIAN NAME NAME STREET ADDRESS 4208 NORTH 31ST AVE SUITE #3 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33021 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition GORDON, ALLEN NAME NAME STREET ADDRESS 4208 NORTH 31ST AVE SUITE #3 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL 33021 TITLE Delete TITLE Change ☐ Addition SULTAN, EDDIE 🗻 NAME STREET ADDRESS 4208 NORTH 31ST AVE SUITE #3 STREET ADDRESS CITY-ST-7/P HOLLYWOOD FL 33021 CITY-ST-7IP TITI F ☐ Delete TITLE NAME NAME VERNON, IRA 4208 NORTH 315T AVE SHITE #3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Hellywood, FL 33001 Delete VOS ☐ Change Addition KIRVER JOE 435 AVE SHITE #3 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

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 suppliemental 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 feceiver 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-2001

754-561-3607

Date

Daytime Phone #