2002 UNIFORM BUSINESS REPORT (UBR)

Jun 20, 2002 8:00 am DOCUMENT # V22775 **Secretary of State** J HAGEL INC. 06-20-2002 90063 042 ***550.00 Principal Place of Business Mailing Address 30.SPOONBILL 30 SPOONBILL KEY WEST FL 33040 KEY WEST FL 33040 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 65-0322450 Not Applicable Country 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 HAGEL, JEFF Street Address (P.O. Box Number is Not Acceptable) 30 SPOON BILL KEY WEST FL 33040 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. [] (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition HAGEL, JEFF NAME NAME STREET ADDRESS 30 SPOONBILL STREET ADDRESS CITY-ST-ZIP KEY WEST FL 33040 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition KILLIAN, GERARD NAME STREET ADDRESS 2430 PATTERSON AVE STREET ADDRESS CITY-ST-ZIP KEY WEST FL 33040 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME

13. I hereby certify that the information supplied with this filling 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 it changed, or on an attachment with an address, with all other like empowered.

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SEEFE HAGEL 6/13/02

Change

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Addition

FILED