2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 06, 2001 08:00 AM **DOCUMENT#** V27481 1. Entity Name **Secretary of State** NUJAK DEVELOPMENT INC. Principal Place of Business Mailing Address 711 N KENTUCY AVE 1031 W. 14TH STREET LAKELAND FL LAKELAND FL33801 33805 2. Principal Place of Business 3. Mailing Address 1031 W. 14TH STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For LAKELAND 59-3120296 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KENDRICK, FRANK, JR. KENDRICK, FRANK 1031 W 14TH STREET Street Address (P.O. Box Number is Not Acceptable) 1031 W 14TH STREET LAKELAND FL33805 US City Zip Code LAKELAND 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. FRANK KENDRICK JR. 02/06/2001 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 After MAY 1, 2001 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be 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 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (11/00) ☐ Addition HAMILTON ROBERT MAME NAME 1031 W. 14TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33805 CITY-ST-ZIP D ☐ Delete TITLE ☐ Change NAME KENDRICK, SONJI H. NAME STREET ADDRESS 1031 W. 14TH STREET STREET ADDRESS CITY-ST-ZIP LAKELAND \mathbf{FL} CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition KENDRICK, FRANK, JR. NAME STREET ADDRESS 1031 W. 14TH STREET STREET ADDRESS CITY-ST-ZIP LAKELAND FLCITY-ST-ZIP TITLE ☐ Delete TITLE Сhапде Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition 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 changed, or on an attachment with an address, with all other like empowered.

PRES

02/06/2001

Daytime Phone #

Date

FRANK KENDRICK JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _