FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 21, 2002 8:00 am Secretary of State

| ON ON DOSINESS REPORT (ODR) | | | 05-21-2002 90889 021 ***150.00 | |
|--|---------------------------------|--|--|--|
| DOCUMENT # V5/364 L 1. Entity Name David Marks Inveriors, Inc. | | | | |
| 1. Entity Name | | | | |
| David ME In | T, 21011337 | Inc. | | |
| | | | | |
| | | | | |
| DO NOT WRITE | IN THIS SE | AGE | | |
| 以中によって、生みない。如何を 言葉権を指す。 | ment of eleme | | | |
| 2. Principal Place of Business 201 Sunset Road | | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | DO NOT WRITE IN THIS SPACE | |
| | City & Store | | 4. FEI Number Applied For | |
| W. Palm Beach A | City & State | | 65-0393514 | Not Applicable |
| Zip Country | Zip | Country | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 33401 PB | | | 7Name and Address of Current Regis | |
| Name | | | | |
| | | | P.O. Box Number is Not Acceptable) | |
| THIS SP | | 11 2019 | Sunser 12000 | |
| | | City | ^ - | Zin Code |
| 1 / / / / / / / / / / / / / / / / / / / | | City W · Y | rain seach | FL Z3401 |
| 8. The above larged cold subouts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. | | | | |
| | | | | |
| SIGNATURE Spratus, typed or printed name of registered agent as | ed title if applicable. (NOTE: | Registered Agent signature require | d when reinstating) L | DATE |
| 9. This corporation is eligible to satisfy its Intangible | L January 1 M | v/1 Fee la \$150.00 | 10. Election Campaign Financin | 9 _ \$5.00 May Be |
| fax filing requirement and elects to do so. (See criteria on back) | Amended | (USI) (IS SE) (25.000 cm e (o) separtment of Sis | Trust Fund Contribution. | Added to Fees |
| 11. OFFICERS AND C | | Elo Babatthall offsig | | AND LEGISLATIVE CONTROL PROST |
| TITLE . P | | STILL STATE | | 2/01) |
| STREET ADDRESS 201 SUNBET 12 | park | NAME SE STREET ADDRESS | | |
| CITY-ST-ZIP W. Palm Be | ach FL 3340 | CITY-ST-ZIP | | CR2E034B (12/01 |
| TITLE | | inu. | | . RZE |
| NAME Street address | | NAME. STREET ADDRESS | PROPERTY OF THE STATE OF THE ST | |
| CITY-ST-ZIP | | CITY-ST-ZIP | an and the second statement is a | i generali generali propini |
| THE | | THE PARTY OF MARIN | | |
| STREET ADDRESS | | STREET ADDRESS | Balliat W | DITE |
| CITY-ST-ZIP | | City st 200 | DO NOT W | The state of the s |
| TITLE | | TITLE | IN THIS SP | ACE |
| NAME STREET ADDRESS | | STREET ADDRESS | | Attribute of the service of the Control of the Cont |
| CITY-ST-ZIP | | CITY-ST-ZIP | Partigore de la company de la | |
| TITLE NAME | | TITLE AND THE STATE OF THE STAT | | |
| STREET ADDRESS | • | STREET ADDRESS | | |
| City-St-ZiP | | CIY/ST ZP | Programmes has a recent of a material of | |
| INTE | | MILE HAAG | | A BUCK SPECIFICATION OF SUPERIOR |
| STREET ADDRESS | •) | STREET ADDRESS: | | |
| CITA-21 ST-51 ST-5 | | CITY ST ZIP | | TENERS OF THE PARTY OF THE PART |
| I hereby certify that the information applied with t indicated on this report or supplemental eport is t | true and accurate and that m | y signature shall have the | same legal effect as if made under oath; ti | hat I am an officer or director |
| of the corporation of the received or trostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered. | | | | |
| SIGNATURE: | | | | |
| SIGNATURE AND TYPED OF PR | NUTED NAME OF SIGNING OFFICER O | R DIRECTOR | Date | Daytime Phone ≠ |