2001 UNIFORM BUSINESS REPORT (UBR)

Apr 10, 2001 8:00 am Secretary of State **DOCUMENT # V72481** 1. Entity Name F-N-F STORES, INC. 04-10-2001 90134 036 ***150.00 Principal Place of Business Mailing Address 17851 NW 78 AVE. 17851 NW 78 AVE. -6165500-MIAMI_FL_33015 MIAMI-FL=33015= U\$ 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 4. FEI Number 65-0363113 Not Applicable Zip Zip 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 AHURALI DAMJI PADAMSEY, PARINBANU Z Street Address (P.O. Box Number is Not Acceptable) 17851 NW 78TH AVENUE **MIAMI FL 33015** 17851 NW. 78 AVENUE 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. ZAHURALI D. PADAMSFY 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 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE ☐ Delete TITLE Addition ZAHURALI DAMJI PADAMSEY 17851 NW. 78 AVE NAME PADAMSEY, PARINBANU Z NAME STREET ADDRESS STREET ADDRESS 17851 NW 78 AVE. CITY-ST-ZIP MIAMI, FL. 33015-1805 CITY-ST-ZIP MIAMI FL 33015-2805 ☐ Delete TITLE ☐ Addition TITLE PARINBANU Z. PADAMSEY NAME NAME STREET ADDRESS 17851 NW. 78 AVE. STREET ADDRESS CITY-ST-7IP MIAMI, FL. 33015-2805 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS 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.

SIGNATURE: .