2000 UNIFORM BUSINESS REPORT (UBR)

Apr 27, 2000 8:00 am Secretary of State DOCUMENT # P9500028578 TENT & PARTY RENTAL, INC. 04-27-2000 90109 003 ***150.00 Principal Place of Business Mailing Address 3904 117TH STREET WEST 3904 117TH STREET WEST BRADENTON FL 34210-1027 **BRADENTON FL 34210** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0575860 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARRETT LOCK, KEITH S Street Address (P.O. Box Number is Not Acceptable) 5026 22ND COURT EAST 117TH ST. WEST **BRADENTON FL 34203** Zip Code BRADENTON 34210 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. iired when reinstating) 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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees 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. DTS Addition 🔀 Delete TITLE TITLE LOCK, KEITH S NAME NAME 5026 22ND COURT EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP Change ☐ Addition Delete TITLE BARRETT, PHILLIP A NAME NAME 3904 117TH STREET WEST STREET ADDRESS STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete -TITLE . . TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME 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