2000 UNIFORM BUSINESS REPORT (UBR)

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FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-08/02/00--01006--015
****550.00 ****550.00
DO NOT WRITE IN THIS SPACE

1. Entity Name

PRINTONTHENET.COM, INC.

Principal Place of Business	Mailing Address
4491 SOUTH STATE ROAD 7 SUITE 214 FORT LAUDERDALE, FL 33314	4491 SOUTH STATE ROAD 7 SUITE 214 FORT LAUDERDALE, FL 33314

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0896930 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALEX P. ROSENTHAL, ESQ. 3801 HOLLYWOOD BOULEVARD, SUITE 350 HOLLYWOOD, FLORIDA 33021	Name: DENNIS J. OLLE, ESQ. Street Address (P.O. Box Number is Not Acceptable): 2601 SOUTH BAYSHORE DRIVE, SUITE 1600 City: MIAMI FL Zip Code: 33133

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: Dennis J Olle — DENNIS J. OLLE, 7/17/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! FEE IS $150.00
After MAY 1, 2000 Fee will be $400.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
☒ Delete C ROGATINSKY, BENJAMIN 7700 NW 37 AVENUE MIAMI, FL 33147	TITLE: D/CEO ☒ Change ☐ Addition NAME: POLAN, NEAL J. STREET ADDRESS: 4491 SOUTH STATE ROAD 7, SUITE 214 CITY - ST - ZIP: FORT LAUDERDALE, FL 33314
☒ Delete P ROGANTINSKY, SAMUEL 7700 NW 37 AVENUE MIAMI, FL 33147	TITLE: CFO ☒ Change ☐ Addition NAME: NORRIS, ROBERT K. STREET ADDRESS: 4491 SOUTH STATE ROAD 7, SUITE 214 CITY - ST - ZIP: FORT LAUDERDALE, FL 33314
☒ Delete D LAMBERT, PAUL 7700 NW 37 AVENUE MIAMI, FL 33147	TITLE: D ☒ Change ☐ Addition NAME: PRIDDY, ROBERT STREET ADDRESS: 4491 SOUTH STATE ROAD 7, SUITE 214 CITY - ST - ZIP: FORT LAUDERDALE, FL 33314
☐ Delete	TITLE: D ☒ Change ☐ Addition NAME: REICHENBAUM, MARC STREET ADDRESS: 4491 SOUTH STATE ROAD 7, SUITE 214 CITY - ST - ZIP: FORT LAUDERDALE, FL 33314
☐ Delete	TITLE: D ☒ Change ☐ Addition NAME: ROSS, ADAM STREET ADDRESS: 4491 SOUTH STATE ROAD 7, SUITE 214 CITY - ST - ZIP: FORT LAUDERDALE, FL 33314
☐ Delete TS	TITLE: D ☒ Change ☐ Addition NAME: PICKETT, GEORGE F. STREET ADDRESS: 4491 SOUTH STATE ROAD 7, SUITE 214 CITY - ST - ZIP: FORT LAUDERDALE, FL 33314

CR2E034 (9/99)

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: Robert K. Norris — Robert K. Norris, CFO 7/18/00 — (954) 581-4233
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #