Secretary of State

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2003 FOR PROFIT CORPORATION NIFORM BUSINESS REPORT (UBR)	Apr 25, 2003 8:
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DOCUMENT # P02175 1. Entity Name Mailing Address



ILUKA RESOURCES INC. Principal Place of Business 2233 PARK AVENUE 2233 PARK AVENUE 200A 200A ORANGE PARK FL 32073 ORANGE PARK FL 32073 US us 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-2419741 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PHILLIPS, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 2233 PARK AVENUE 200A **ORANGE PARK FL 32073** 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, TITLE Delete TITLE Addition GORONCY, JOHN NAME NAME STREET ADDRESS 2233 PARK AVENUE STREET ADDRESS CITY-ST-ZIP **ORANGE PARK FL 32073** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition STD NAME PHILLIPS, MICHAEL NAME STREET ADDRESS STREET ADDRESS 2233 PARK AVENUE CITY-ST-ZIP CITY-ST-ZIP **ORANGE PARK FL 32073** TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME FOLWELL, MICHAEL STREET ADDRESS STREET ADDRESS 2233 PARK AVENUE CITY-ST-ZIP CITY-ST-ZIP **ORANGE PARK FL 32073** STEVE VVARD, PRESIDENT Change 2233 PARK AVENUE, SUITE 2004 TITLE TITLE Delete X Addition NAME NAME BOHANNAN, HAMISH STREET ADDRESS STREET ADDRESS 2233 PARK AVENUE ORANGE PARK FL 32073 CITY-ST-ZIP CITY-ST-ZIP **ORANGE PARK FL 32073** TITLE ☐ Delete TITLE ☐ Addition NAME HUDSON, ROBERT NAME STREET ADDRESS STREET ADDRESS 2233 PARK AVENUE CITY-ST-ZIP CITY-ST-ZIP ORANGE PARK FL 32073 TITLE Delete Addition NAME HUGHES, MARK NAME STREET ADDRESS STREET ADDRESS 2233 PARK AVENUE CITY-ST-7IP CITY-ST-ZIP **ORANGE PARK FL 32073**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: