CR2E034 (10/00

Daytime Phone 4

2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 18, 2001 8:00 am Secretary of State DOCUMENT # P97000033317 1. Entity Name GLOBAL INFRASTRUCTURE CORP. 04-18-2001 90011 022 ***150.00 Principal Place of Business Mailing Address 3453 WHITE WILLOW WAY 3453 WHITE WILLOW WAY SPRING HILL FL 34606 SPRING HILL FL 34606 2. Principal Place of Business 3. Mailing Address Box 8054 Spring Hill De O. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State~ 4. FEI Number Applied For 59-3438735 Not Applicable FL Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 3461 34606 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent to weber WEBER, MATT Street Address (P.O. Box Number is Not Acceptable) 3453 WHITE WILLOW WAY Spring SPRING HILL FL 34606 Zip Code 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 TITLE ☐ Delete TITLE WEBER, MATTHEW NAME NAME STREET ADDRESS 3453 WHITE WILLOW WAY STREET ADDRESS CITY-ST-ZIP SPRING HILL FL 34606 CITY-ST-7IP TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR