I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN SLAVIK

Electronic Signature of Signing Officer/Director Detail

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.

Title

Name

Address

City-State-Zip:

CEO

VP, COO

SUITE F

SLAVIK, ANNETTE

1433 S FORT HARRISON AVE

CLEARWATER FL 33756

Date

Certificate of Status Desired: No

DOCUMENT# P07000110160 Entity Name: PRODIGY NETWORK SERVICES, INC.

Current Principal Place of Business:

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

1433 S FORT HARRISON AVE SUITE F CLEARWATER, FL 33756

Current Mailing Address:

1433 S FORT HARRISON AVE SUITE F CLEARWATER, FL 33756 US

FEI Number: 45-0575448

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

SLAVIK, JOHN M 1433 S FORT HARRISON AVE SUITE F CLEARWATER, FL 33756 US

Officer/Director Detail :

CEO

SUITE F

SLAVIK, JOHN M.

1433 S FORT HARRISON AVE

CLEARWATER FL 33756

SIGNATURE:

Title

Name

Address

City-State-Zip:

FILED Apr 03, 2024

Secretary of State

7748623925CC

04/03/2024

Date