FILED 2001 UNIFORM BUSINESS REPORT (UBR) Feb 28, 2001 8:00 am Secretary of State DOCUMENT # F0000002540 PATRIOTCOM INC. 2-28-2001 90035 044 ***150.00 Principal Place of Business 2500 E. HALLANDALE BEACH BLVD., SUITE 800 2500 E. HALLANDALE BEACH BLVD., SUITE 800 HALLANDALE FL 33009 HALLANDALE FL 33009 3. Mailing Address 2. Principal Place of Business DO N BISCAYNE BIVER Suite, Apt. #, etc. 100 N BISCAYNL DIND Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 500 500 City & State City & State 4. FEI Number Applied For 65-0995129 MIAMI Not Applicable Zip 33/32 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 Name VELA VEGA, RICHARD Street Address (P.O. Box Number is Not Acceptable) 2500 E. HALLANDALE BEACH BLVD., SUITE 800 HALLANDALE FL 33009 500 physits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) CP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME VEGA, RICHARD 100 N. Biscogne Blud, Suite 500 STREET ADDRESS STREET ADDRESS 2500 E. HALLANDALE BEACH BLVD., SUITE 800 Migmi FL 33132 CITY-ST-ZIP CITY-ST-ZIP HALLANDALE FL 33009 VC 🔀 Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME SEGALL, SANDY STREET ADDRESS STREET ADDRESS 2500 E. HALLANDALE BEACH BLVD., SUITE 800 CITY-ST-ZIP CITY-ST-ZIP HALLANDALE FL 33009 ☐ Delete ☐ Addition TITLE DS TITLE NAME 100 N. Biscayne Blod, Suite 500 Miami FL 33132 NAME KOHOT, JOE STREET ADDRESS STREET ADDRESS 2500 E. HALLANDALE BEACH BLVD., SUITE 800 CITY-ST-ZIP CITY-ST-ZIP HALLANDALE FL 33009 ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE ☐ Change ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

13. I hereby certify that the information supplied with this filling 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 supplymental 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 impowered 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.