2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 16, 2001 8:00 am Secretary of State DOCUMENT # F0000005253 1. Entity Name EDVENTIONS, INC. 04-16-2001 90008 013 ***150.00 Principal Place of Business Mailing Address 8808 BRONX AVENUE 8808 BRONX AVENUE SKOKIE IL 60077 SKOKIE IL 60077 741638 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-4334972 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 Fiorida, NO CHANGE OF AGENT SIGNATURE 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 STCD TITLE ☐ Delete TITLE Change MILLER, HARVEY L. SHAPIRO, IRVIN M NAME NAME THE BENIOH GROUP LLC; 475 HALFDAY RD. STE 100 8808 BRONX AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7tP SKOKIE IL 60077 LINCOLNEHIRE, IL 60069 🔀 Change TITLE ☐ Detete TITLE ☐ Addition SCOTT, LOIS A NAME NAME 8808 BRONX AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SKOKIE IL 60077 TITLE" TITLE COO=----☐ Delete Change ☐ Addition MAGID, RICHARD MAGRID, RICHARD NAME NAME STREET ADDRESS 8808 BRONX AVENUE STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP SKOKIE IL 60077 TITLE 🔀 Delete TITLE ☐ Change Addition WILSON, MURRAY LUDWIG. MICHAEL S NAME NAME 221 E. FOURTH ST. STE 1900 8808 BRONX AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SKOKIE IL 60077 CITY-ST-ZIP CINCINNATI, OH 45202 Delete TITLE ☐ Change Addition NAME BUNES, STEVE NAME Buck, GREG STREET ADDRESS 8808 BRONX AVENUE 805 É, MAPLE RD. STE. 333 STREET ADDRESS CITY-ST-ZIP SKOKIE IL 60077 CITY-ST-ZIP BIRHINGHAM, MI 48009 TITLE Delete TITLE Change ☐ Addition NAME KUGLER, JOSHUA STREET ADDRESS 8808 BRONX AVENUE STREET ADDRESS CITY-ST-ZIP SKOKIE IL 60077 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 withyan address, with all other like empowered.