FILED Apr 28, 2003 8:00 am Secretary of State

2003 FOR PROFIT CORPORATION

PROCED FACE OF SURFESS SELECTIONS FOR SURF 203 SENDING AND SURF 203 SELECTION SURF 203 SELECTION SURF 203 SELECTION SURF 203 SELECTION SURF 203 SURF ART 6. etc.	DOCU	MENT # F00901 ONIC LTD., INC.					04-28-200)3 91517 045 °	150.00
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Secretaria Sec	Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
S. Certificate of Station Depth Fee Required	City & State		City & State		4. FEI Numbe	59-2042222			
Street Address (P.O. Box Number is Not Acceptable)	Zip Country		Zip	Country		5. Certificate	of Status Desired		
Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable)	}	6 Name and Address of Current	Registered Agent		Name	7. Name and	Address of New R	egistered Agent	
B. The above named entity suprits 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 registering agent. SIGNATURE Signature Injury Injury	8900 SW 10 SUITE 203	7 AV		<u> </u>	<u> </u>	P.O. Box Numb	er is Not Acceptable)	
THE NOVET! FEE IS \$150.00 After May 1: 2003 Fee will live \$550.00 After May 1: 2003 Fee will live at the information supplied with this filing does not custly for the evernation space in Section 110 07(30). Fonds Statutes, I further certify that the information control or into control the receiver or trustee empowered to evecute this report as required by Chapter \$507. Florata Statutes, and that mm name appears in Book 10 or of chapter or of the corporation or the receiver or trustee empowered to evecute this report as required by Chapter \$507. Florata Statutes, and that mm name appears in Book 10 or of chapter or of that and on this report or on an attachment, when all parts are possible will all have the same apparer in Book 10 or Block 11 if change or on an attachment, when all parts are possible will all have the same approach in Book 10 or Block 11 if				ŀ	City		 .	FL Zip C	Code
FILE NOW!! FEE:S:\$15.000 After May! 2003 Fee will be \$560 00 Make Check Payable to Plorida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 INDE IMME LETANNEUR, JACQUES STEET ADDRESS CITY-S1-2P INLE STREY ADDRESS STEET 1, GIBRALTER, FL.3 TRIAY, L.W. STEET ADDRESS STEET 1, GIBRALTER, FL.3 TRIE IMME STREY ADDRESS STEET ADDRESS STREY ADDRESS CITY-S1-2P TRIE AS IMME STREY ADDRESS CITY-S1-2P TRIE			r the purpose of changing its	s registere	d office or register	red agent, or bo	th, in the State of Flo	vida. I am familiar w	ith, and accept
After May 1: 2003 Fee will be \$500 do	SIGNATURE .	Signature, by ed or printed name of registered agent	and title if applicable. (NO	TE: Registered	Agent Signature required	d when reinstating)		CATE	
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1/11 E Delete TITLE Change Addition NAME STREET ADDRESS City - ST - ZIP 12. 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 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.	NAME STREET ADDRESS	FELDMAN, ROBERT 8900 SW 107 AVE SUITE 203	Delek	NAME STREE	TADDRESS			☐ Chan	ge 🗌 Addition
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.	TITLE NAME STREET ADDRESS		☐ Delete	TOLE NAME STREE	T ADDRESS			☐ Chan	ge Addition
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