May 12, 2000 8:00 am 2000 UNIFORM BUSINESS REPORT (UBR) Secretary of State DOCUMENT # **F9900004**835 05-12-2000 90081 015 ***150.00 NEON CapITAL INVESTMENTS, INC. Principal Place of Business Mailing Address 2213 Frostproof ST. LAS Vegas NV 89128 80091325 3. Mailing Address 2. Principal Place of Business ROAD 5550 GLADES 5550 GLADES ROAD DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc STE 308 308 Applied For City & State City & State Boca RATON 490700 Not Applicable Boca RATON \$8.75 Additional Country 5. Certificate of Status Desired USA 3343 Fee Required US A 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATE CREATIONS ENTERPRISES INC Street Address (P.O. Box Number is Not Acceptable) 941 FOURTH STREET #200 MIAMI BEACH FL 33139 Zip Code City FL 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. SIGNATURE DATE (NOTE: Registered Agent signature required when sentstaling) Signature. Liped or printed name or registered agent and title if applicable FILE NOW!!! FEE IS \$150:00 9. This corporation is eligible to satisfy its Inlangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition TITLE Delete TITLE NAME SCHWARTZ, DAVID NAME STREET ADDRESS 5550 GLADES ROAD, STE 308 STREET ADDRESS CITY - \$1 - 7IP **BOCA RATON FL** CITY-\$1-ZIP Addition ☐ Change TITLE ☐ Delete HILE DAME NAME -STREET ADORESS STREET ADDRESS CITY-S1-7P CHY-ST-7IP ☐ Addition Change TITLE ☐ Defete HILE MANAF NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-S1-ZIP ☐ Change Addition ☐ Delete HIG NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-S1-74P CITY-ST-ZIP The exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information by signature shall have the same legal effect as if made under oath; that I am an officer or director as required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 it 13. I hereby certify that the information supplied with this filling does not planticated on this report or supplemental report is true and accurate of the corporation or the receiver or trustee empowered to execute this.

4/27/00 561 362 1014

changed, or on an attachment with an address, with

SIGNATURE: