DOCUMENT # P99000006442

Entity Name

A WEB HOLDINGS, INC.

FILED
May 19, 2000 8:00 am
Secretary of State
05-19-2000 90084 040 ***158.75

Principal Place of Business	Mailing Address
NORTH OCEAN BLVD. SUITE F610 RATON FL 33431	2697 NORTH OCEAN BLVD. SUITE F610 BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
South Ocean Blvd.	1 South Ocean Blvd.
Suite, Apt. #, etc. Suite 301	Suite, Apt. #, etc. Suite 301
City & State Boca Raton, FL	City & State Boca Raton, FL
Zip 33432 Country US	Zip 33432 Country US

4. FEI Number NOT APPLICABLE — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HAMBY, JOSHUA 2697 NORTH OCEAN BLVD, SUITE F610 BOCA RATON FL 33431	Name: SEAN S. McVITY Street Address (P.O. Box Number is Not Acceptable) 1 South Ocean Blvd, Suite 301 City: Boca Raton FL Zip Code: 33432

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: S McVity — SEAN S. McVITY - President — April 6, 2000
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) X

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
☐ Delete TITLE: PSD NAME: MCVITY, SEAN STREET ADDRESS: 5597 PACIFIC BLVD., #3403 CITY-ST-ZIP: BOCA RATON FL 33433	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition
☐ Delete TITLE: TCD NAME: HAMBY, JOSH STREET ADDRESS: 2697 NORTH OCEAN BLVD., SUITE F-610 CITY-ST-ZIP: BOCA RATON FL 33433	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition
☐ Delete TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition PAID 04/26/00 CHECK # 1074
☐ Delete TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition 04/26/00 CHECK # 1109
☐ Delete TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition
☐ Delete TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition

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 with an address, with all other like empowered.

SIGNATURE: S McVity, President — April 6, 2000 (561) 620-9790
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date