FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 22, 2001 8:00 am Secretary of State DOCUMENT # J08642 1. Entity Name 05-22-2001 90058 017 ***150.00 Micro Book International., Inc. Principal Place of Business Mailing Address 770786 2. Principal Place of Business 3. Mailing Address 7777 Glades Road 7777 Glades Road Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 217 <u>Suite 217</u> Applied For City & State 4. FEI Number City & State 59-2673305 Boca Raton FLBoca Raton Γ L Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33434 USA34 33434 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Richard P. Greene, P.A. Street Address (P.O. Box Number is Not Acceptable) 2455 East Sunrise Blvd, Suite 905 Fort Lauderdale, FL 33304 Zio Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when ministrating) FILE HOWIN FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 16. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 sp. Make Check Payable to Department of State. Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Chance ☐ Addition Delete TITLE TITLE ÞÐ NAME David Freedman STREET ACORPSS STREET ADDRESS 7777 Glades Road, Suite 217 CITY-ST-ZIP CITY-ST-ZIP Boca Raton, FL 44343 ☐ Change Addition TITLE NAME MAME STREET ADORESS STREET ADDRESS CITY-ST-ZM CITY-ST-ZIP TITLE ☐ Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IME ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZEP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME HALE STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 with an address, with all other like mpowered 561-218-18 April 24, 2001 SIGNATURE: