FILED 2001 UNIFORM BUSINESS REPORT (UBR) Feb 28, 2001 8:00 am DOCUMENT # V **Secretary of State** 02-28-2001 90125 050 ***150.00 PANAMA City Communications, Inc. Principal Place of Business PARK 80 WEST PIAZAIL 00020601 SADDLE BROOK, NJ 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 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent 1200 SOUTH PINE ISLAND KD. 400 N. Ashley 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 reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. HEEHAD, PATRICK K.
HARK BOWEST, PLAZATE TITLE TITLE NAME PARK 80 WEST, PLAZAIL STREET ADDRESS STREET ADDRESS SADDLEBROOK, NJ 07663 CITY-ST-ZIP CITY-ST-ZIP SADDLEBROOK, NJ 07463 Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IE CITY-ST-ZIP ☐ Change TITLE TITLE NAME NAME K 80 WEST, PAZAII AICHAEL WASSERHAN ARK SO WEST, PHAZAII EADDLE BOOK, 105 0746 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF HIVEBROOK, NOT 67663 Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-S(-ZIP ☐ Change Delete Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME 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

HICHMEL WASSELHAN

changed, or on an attachment with an address, with all other like empowered.

VATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC