

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000007541

FILED
Sep 25, 2002
Secretary of State

Entity Name: EXPONENTIAL GROWTH NETWORKS LLC

Current Principal Place of Business:

6278 NORTH FEDERAL HWY., STE. 186
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6278 NORTH FEDERAL HWY., STE. 186
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-1102323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

NICHOL, CURRIN M
6278 N FEDERAL HWY
186
FT LAUDERDALE, FL 33308 US

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: CURRIN M. NICHOL

09/25/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: EDMONSON, MICHAEL D
Address: 6278 NORTH FEDERAL HWY., STE. 186
City-St-Zip: FT LAUDERDALE, FL 33308

Title: MGR () Delete
Name: NICHOL, CURRIN M
Address: 6278 NORTH FEDERAL HWY., STE. 186
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL D. EDMONSON

MGR

09/25/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date