FILED

2001 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 28, 2001 8:00 am **DOCUMENT # L34315** Secretary of State OLBOTA COMMUNICATIONS, INC. 03-28-2001 90192 027 ***150.00 Principal Place of Business Mailing Address % ROBERT DWYER END OF 2ND ST. LEHIGH ACRES FL 33936 P.O. BOX 061239 FT MYERS FL 33906 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 65-0164990 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent. Robert Dwyer DWYER, ROBERT Street Address (P.O. Box Number is Not Acceptable) 9310 BAYBERRY BEND #103 FT. MYERS FL 33908 city Estero Zip Code 3*39*3& 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) ☐ Change TITLE ☐ Delete TITLE Aobert Dwyer DWYER, ROBERT NAME NAME 21743 Sound WAY #102 STREET ADDRESS STREET ADDRESS 9310 BAYBERRY BEND #103 Estero Fl. 33928 CITY-ST-ZIP FT MYERS FL 33908 CITY-\$T-ZIP ☐ Change TITLE ☐ Delete TITLE marjorie Dwyer DWYER, MARJORIE NAME NAME 21743 Sound WAY #102 STREET ADDRESS 93 10 BAYBERRY BEND #103 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT. MYERS FL 33908 Estero Fl. 339a8 Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 eath; that I am an efficer 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

3/29/01