2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L40346 May 15, 2000 8:00 am Secretary of State 1. Entity Name DSL MIAMI, INC. 05-15-2000 90272 026 ***150.00 Principal Place of Business Mailing Address 9901 NW 106 ST 9907 NW 106 ST MEDLEY FL 33178 MEDLEY FL 33178-1237 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0167361 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name REYES, FRANK L Street Address (P.O. Box Number is Not Acceptable) 9901 NW 106 ST MEDLEY FL 33178 Zip 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 reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS ☐ Addition TITLE CEO ☐ Delete TITLE Change NAME GRANTHAM, PAUL COLBERT NAME STREET ADDRESS STREET ADDRESS 5011 FIRESTONE PLACE CITY-ST-ZIP CITY-ST-ZIF **SOUTH GATE CA 90280** ☐ Addition TITLE Change Delete NAME CRANDALL, DARSE E. NAME STREET ADDRESS STREET ADDRESS 5011 FIRESTONE PLACE CITY-ST-ZIP CITY-ST-7IP SOUTH GATE CA 90280 Addition Delete Change CFO TITLE TITLE michael NAME MAREVICH, MICHAEL NAME 5011 Firestone Place STREET ADDRESS STREET ADDRESS **5011 FIRESTONE PLACE** CITY-ST-7IP CITY-ST-ZIP **SOUTH GATE CA 90280** ☐ Addition COO ☐ Chande ☐ Delete TITLE TITLE MCGEE, CHARLES NAME STREET ADDRESS STREET ADDRESS 5011 FIRESTONE PLACE CITY-ST-ZIP CITY-ST-ZIP SOUTH GATE CA 90280 ☐ Addition ☐ Defete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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(323) 583-7761

Daytime Phone #