2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L98000000251

Entity Name: CODESPRING, L.C.

FILED Jan 28, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3601 "S" STREET NW 3801 HARLANO STREET WASHINGTON, DC 20007 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

3601 "S" STREET NW 3801 HARLANO STREET WASHINGTON, DC 20007 CORAL GABLES, FL 33134

FEI Number: 65-0817311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STANCIOFF, ALEX
912 MESSINA AVENUE
CORAL GABLES, FL 33134 US
STANCIOFF, ALEX
3801 HARLANO STREET
CORAL GABLES, FL 33134 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: 01/28/2003

Electronic Signature of Registered Agent Date

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

() Change () Addition

MANAGING MEMBERS/MEMBERS:

itle: MGR () Delete

Name: MISHKOVSKY, MILEN I

Address: 3601

City-St-Zip: WASHINGTON, DC 20007 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: STANCIOFF, ALEX C Name: STANCIOFF, ALEX C

Name: STANCIOFF, ALEX C
Address: 912 MESSINA AVENUE Address: 3801 HARLANO STREET
City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: CORAL GABLES, FL 33134 US

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: ALEX STANCIOFF MGR 01/28/2003