2001 UNIFORM BUSINESS REPORT (UBR) FILED May 10, 2001 8:00 am DOCUMENT #M54785 1. Entity Name **Secretary of State** IGI INTERNATIONAL, INC. 05-10-2001 90130 021 ***150.00 Principal Place of Business Mailing Address 126 E. 9th Court 126 E. 9th Court Hialeah, FL 33010 Hialeah, FL 33010 A0063030 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. FFI Number Applied For 59-2845283 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 Name Lamont & Neiman, P.A. Street Address (P.O. Box Number is Not Acceptable) One Biscayne Tower, Suite 3550 2 South Biscayne Boulevard Miami, Florida 33131 City Zip Code FL 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: Rog stered 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Change ☐ Addition PD TITLE ☐ Delete TIT1 F NAME, MAMAG THOMAS, JOSEPH M. STREET ADDRESS STREET ADDRESS 126 E. 9th Court CITY-ST-ZIP CITY-ST-7IP Hialeah, Florida 33010 Addition Change T:TLE Delete $^{\rm CD}$ NAME NAME THOMAS, DIANA N. STREET ADDRESS STREET ADDRESS 126 E. 9th Court CITY-ST-ZIP CITY-ST-ZIP Higleah, Florida 33010 Change Z Delete Addition TITLE BENTLEY-BAKER, KANDELL NAME NAME STREET ADDRESS 13899 Biscayne Blvd. S205 STREET ADDRESS C!TY-ST-ZIP CITY-ST-7IP N. MIAMI BEACH, FL Change Addition TITLE Delete NAME NAME SOLOMON, CAROL STREET ADDRESS STREET ADDRESS 1750 CHARLES ST., (APT. 316) CITY-ST-ZIP CITY-ST-ZIP NEW ORLEANS, LA Change Addition TITLE Delete TITLE NAME ROYAL, CATHY L STREET ADDRESS STREET ADDRESS 13899 Biscayne Blvd. S205 CITY - ST - ZIP CITY-ST-ZIP N. MIAMI BEACH, FL 33181 ☐ Change ☐ Addition TITLE ☐ Delete TITLE

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.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CDY-ST-ZIP

Monathre and types or printed name of signing officer or director Joseph M. Thomas President

V4-25-01

305-888-5532

Daytime F