2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2003
Secretary of State

DOCUMENT# M98649

Entity Name: MEXBRIT, INC.

Current Principal Place of Business:

2655 LEJEUNE RD
STE 528
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

2655 LEJEUNE RD
STE 528
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 65-0080552 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
STE 4000
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: WIGG, JOHN C.,
Address: 2655 LEJEUNE RD. #528
City-St-Zip: CORAL GABLES, FL

Title: SVP ( ) Delete
Name: DODSON, JOHN A.,
Address: 2655 LEJEUNE RD #528
City-St-Zip: CORAL GABLES, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: WIGG, JOHN C.,
Address: 2655 LEJEUNE RD. #528
City-St-Zip: CORAL GABLES, FL 33134

Title: SVP (X) Change ( ) Addition
Name: DODSON, JOHN A.,
Address: 2655 LEJEUNE RD #528
City-St-Zip: CORAL GABLES, FL 33134

Title: V ( ) Change (X) Addition
Name: VERNON, ROBERT A.,
Address: 2655 LEJEUNE RD #528
City-St-Zip: CORAL GABLES, FL 33134

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C. WIGG DPS 02/08/2003

Electronic Signature of Signing Officer or Director — Date