2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2005
Secretary of State

DOCUMENT# N03000006814

Entity Name: NETIP MIAMI INC.

Current Principal Place of Business:

PO BOX 013276
MIAMI, FL 33101

New Principal Place of Business:

1743 NW 81ST WAY
PLANTATION, FL 33322

Current Mailing Address:

PO BOX 013276
MIAMI, FL 33101

New Mailing Address:

1743 NW 81ST WAY
PLANTATION, FL 33322

FEI Number: 77-0631077 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KAPADIA, TEJAL D
555 NE 34TH ST
2308
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

CHANDRAHASA, SHEILA
1743 NW 81ST WAY
PLANTATION, FL 33322 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: SHEILA CHANDRAHASA 08/24/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KAPADIA, TEJAL D
Address: PO BOX 013276
City-St-Zip: MIAMI, FL 33101 US

Title: VP ( ) Delete
Name: CHANDRAHASA, SHEILA
Address: PO BOX 013276
City-St-Zip: MIAMI, FL 33101 US

Title: TREA (X) Delete
Name: JAIRAM, INDIRA
Address: PO BOX 013276
City-St-Zip: MIAMI, FL 33101 US

Title: WEB (X) Delete
Name: MISTRY, NITESH
Address: PO BOX 013276
City-St-Zip: MIAMI, FL 33101 US

Title: SEC (X) Delete
Name: BHANDARI, SHEILA
Address: PO BOX 013276
City-St-Zip: MIAMI, FL US

Title: CL (X) Delete
Name: PATEL, MALVI
Address: PO BOX 013276
City-St-Zip: MIAMI, FL 33101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CHANDRAHASA, SHEILA
Address: 1743 NW 81ST WAY
City-St-Zip: PLANTATION, FL 33322 US

Title: NL (X) Change ( ) Addition
Name: KAPADIA, TEJAL D
Address: 555 NE 34TH ST, APT 2308
City-St-Zip: MIAMI, FL 33137 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TEJAL KAPADIA NL 08/24/2005
Electronic Signature of Signing Officer or Director — Date