2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010564

Name:

Address:

City-St-Zip:

Apr 30, 2009 Secretary of State

Entity Name: INTERNET REVIEW CORPORATION Current Principal Place of Business: New Principal Place of Business: 13808 PATHFINDER DRIVE TAMPA, FL 33625 **Current Mailing Address: New Mailing Address:** 13808 PATHFINDER DRIVE TAMPA, FL 33625 FEI Number: 26-3961744 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: DIPIERRO, ANTHONY 13808 PATHFINDER DRIVE TAMPA, FL 33625 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition KOHS, GREGORY Name: Name: Address: Address: 489 LAKE GEORGE CIRCLE City-St-Zip: City-St-Zip: WEST CHESTER, PA 19382 US Title: Title: () Change (X) Addition () Delete DIPIERRO, ANTHONY Name: Name: Address: Address: 13808 PATHFINDER DRIVE City-St-Zip: City-St-Zip: TAMPA, FL 33625 US Title: () Delete Title: () Change (X) Addition WEHAGE, PAUL Name: Name: Address: Address: 18, RUE MARTHE AUREAU City-St-Zip: City-St-Zip: LAGNY-SUR-MARNE FRANCE. - 77400 FR Title: () Delete Title: () Change (X) Addition BAGLEY, JUDD

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

4698 N SHADY VIEW LN

LEHI, UT 84043 US

SIGNATURE: ANTHONY DIPIERRO Τ 04/30/2009