

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000000610

FILED
Apr 18, 2002 8:00 AM
Secretary of State

Entity Name: MIVNET CORPORATION

Current Principal Place of Business:

3389 SHERIDAN ST.
PMB 443
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

3389 SHERIDAN STREET
BOX 443
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 65-0584636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, MARK
3958 FARRAQUOT ST
HOLLYWOOD, FL 33021 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

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: LEVY, MARK L.
Address: 3389 SHERIDAN STREET #443
City-St-Zip: HOLLYWOOD, FL 33021

Title: PD () Delete
Name: SPENCE, BRIAN
Address: 11777 BERNARDO PLAZA CT
City-St-Zip: SAN DIEGO, CA 92128

Title: VPD () Delete
Name: DUNAIEF, JONATHON C/O C
Address: 26 S. CENTRAL AVE.
City-St-Zip: ELMSFORD, NY 10523

Title: VP () Delete
Name: FRAVEL, STEVE C/O INS
Address: 4201 CORPORATE DR.
City-St-Zip: W. DES MOINES, IA 50266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARK LEVY

DT

04/18/2002

Electronic Signature of Signing Officer or Director

Date