2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000005135

Entity Name: BIZNET EXCHANGE, INC.

Apr 25, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7667 WEST SAMPLE ROAD #265 POMPANO BEACH, FL 33065 US

Current Mailing Address: New Mailing Address:

7667 WEST SAMPLE ROAD #265 POMPANO BEACH, FL 33065 US

FEI Number: 65-0696687 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:

TOBLER, RICHARD
4584 N HIATUS RD
SUNRISE, FL 33351
US

MEDINA, HECTOR
2929 EAST COMMERCIAL BLVD
SUITE 705

UNRISE, FL 33351 US SUITE 705 FT. LAUDERDALE, FL 33308 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: HECTOR MEDINA 04/25/2002

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: TD () Delete Title: () Change() Addition

 Name:
 MEANS, LAURENCE R
 Name:

 Address:
 7667 WEST SAMPLE ROAD #265
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33065
 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition

Name: TOBIER, RICHARD Name: MEDINA, HECTOR

Address: 4585 N HIATUS ROAD Address: 2929 EAST COMMERCIAL BLVD, SUITE 705

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: FT. LAUDERDALE, FL 33308

Title: ASD () Delete Title: VD (X) Change () Addition Name: MCCLELLAN, SUZANNE Name: MCCLELLAN, SUZANNE

Address: 2500 N MILITARY TRAIL STE 465 Address: 2500 N MILITARY TRAIL STE 465

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33431

 Title:
 VD
 () Delete
 Title:
 ASD
 (X) Change () Addition

 Name:
 SHNIDER, RONALD
 Name:
 ASHFORD, JANET

 Address:
 1333 S UNIVERSITY DRIVE STE 201
 Address:
 850 RIVERSIDE DRIVE

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 CORAL SPRINGS, FL 33071

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: LAURENCE MEANS TD 04/25/2002