NOT-FOR-PROFIT CORPORATION

Mar 11, 2002 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT 03-11-2002 90076 017 ****61.25 INDUSTRIES TRAINING CORPORATION DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 12425 287h Suite, Apt. #, etc. 12425 28th 51 N Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 103 suite 103 Applied For City & State 4. FEI Number City & State 59-3573446 Not Applicable FETERSBURG, FL ST RETERBURY, \$8.75 Additional 5. Certificate of Status Desired П Fee Required 33716 7. Name and Address of Current Registered Agent Name Brewton, WILBUR DO-NOT-WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE Zip Code 32301 8. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing **FEE IS \$61.25 \$5.00** May Be Trust Fund Contribution. Added to Fees Department of State Initial or Amended UBR OFFICERS AND DIRECTORS 10. CD TITLE TITLE GOODE, R. RAY NAME NAMÉ 3600 NW 82ND AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIE MIAMI, FL 33166 CITY-ST-7IP TITLE NAME-Ofilvie, JR., C. H. STREET ADDRESS STREET ADDRESS 400 N. New YORK AVE, SEE 103 CITY-ST-ZIP CITY-ST-ZIP WINTER PARK, FL 32789 TITLE TITLE NAME NAME Davis, Ranely Jo 12425-2814-51-N_54e_103_ STREET ADDRESS STREET ADDRESS DO-NOT WRITE CITY-ST-ZIP CITY-ST-ZIP ST REAERS BURG, FL 33716 TITLE IN THIS SPACE TITLE NAME ALVAREE, MARCELO A. NAME STREET ADDRESS STREET ADDRESS 777 BYTOKELL AVE SEE 1150 CITY-ST-ZIP CITY-ST-ZIE Minni, FL 33131 TITLE TITLE BRYANT, CECILIA NAME NAME STREET ADDRESS STREET ADDRESS 1400 PRUDENTIAL DR #7 CITY-ST-ZIP CITY-ST-ZIP JACKSONVING, FL 32207

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

TITLE

STREET ADDRESS

NOOVER, ROBIN C.

1000 N. 15 hley 54c 600 TAMPA, FL 33579

FILED

NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)** Hadron 13 Doct N9900003744 DOCUMENT # 1. Entity Name INDUSTRIES TRAINING CORPORATION DO NOT WRITE IN THIS SPACE 3. Mailing Address 2. Principal Place of Business 12425 28th ST N 12425 28th 51 N Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE suite. Swite 103 4. FEI Number Applied For 59- 3573 446 Not Applicable RETERSBURG, FL \$8.75 Additional 5. Certificate of Status Desired 3:3:7:16 7. Name and Address of Current Registered Agent Brewton, WILBUR DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 250 Zip Code 32*301* 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. DATE e of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FEE IS \$61:25 Department of State Trust Fund Contribution. Added to Fees Initial or Amended UBR OFFICERS AND DIRECTORS TITLE HUFF, JAMES E. NAME. NAME 8465 OLD DIXIO HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WABASSO. FL 32970 IIILE 😘 TITLE NAME LEIVA, MARIA CAMILA STREET ADDRESS 1550 MADRUGA AVE STE 406 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CORAL GABUS, FL 33146 TITLE MAY, RANDALL L. NAME NAME STREET ADDRESS STREET ADDRESS 245 Chillerger RD DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP CAPE CANAVERAL, FL 32920 TITLE TITLE IN THIS SPACE NAME NAME Smith, ROBERT M. STREET ADDRESS STREET ADDRESS 12425 28th ST N STE 103 CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG, FL 33716 TITLE TITLE KNIGHTLY, Esther NAME . 12425 28th ST N Ste 103 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG, FL 33716 NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

^{2.} I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.