NOT-FOR-PROFIT CORPORATION MIEADM BIIGINEGG DEDADT /IIRD)

FILED May 06, 2003 8:00 am Secretary of State

	MIFORIN BOSINI	133 NEPU	ui (nau)	,			
DOCU 1. Entity Name	MENT # N9900000		05-06-2003 90055 04	3 ****61.25			
BOUN	ITIFUL INTERNATION		80114000				
,	DO NOT WRITE	IN THIS	SPACE	· · · · · · · · · · · · · · · · · · ·			
	Place of Business CHNOLOGY DRIVE	3. Mailing Address P.O. BOX 28					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State ORLANDO, FLORIDA		City & State ORLANDO, F	City & State ORLANDO, FLORIDA		9-3676530	Applied For Not Applicable	
Zip 32804	Country U.S.A.	32802	Country U.S.A.	5. Certificate of St	atus Desired	8.75 Additional ee Required	
			Name D		ss of Current Registered	Agent	
DO NOT WRITE			. * [Name RANIER MUNNS Street Address (P.O. Box Number is Not Acceptable)			
•			Street Addi	ress (P.O. Box Number is I	Not Acceptable)		
ta ,	IN THIS SPACE 2601 TEC			CHNOLOGY DRIV	HNOLÓGY DRIVE		
	- •	E	City ORL	_ANDO	FL	Zip Code 32804	
the obligati	named entity submits this statement for ions of registered agent.	ir the purpose of chang		gistered agent, or both, in	the state of Florida. I am fan 4/29/03		
SIGNATURE -	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registered Agent signature r	equired when reinstating)	DATE		
FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State		
10.	OFFICERS AND DI	RECTORS				Fig.	
NAME STREET ADDRESS CITY-ST-ZIP	STEPHEN WARD, DIREC 469 N 300 E, APT 1 PROVO, UTAH 84606	TOR	TITLE. NAME STREET ADDRESS CITY-ST-ZIP				
TITLE	APRIL MUNNS, D/C/P		TITLE		, t		

2601 TECHNOLOGY DRIVE STREET ADDRESS STREET ADDRESS ORLANDO, FLORIDA 32804 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE JACOB MUNNS, DIRECTOR NAME NAME 5901 W. BEHREND DRIVE, #1027 STREET ADDRESS STREET ADDRESS DO NOT WRITE GLENDALE, AZ 85308 CITY-ST-ZIP CITY-ST-ZIP TITLE IN THIS SPACE CHETAN PRASAD, DIRECTOR NAME NAME 1565 N. UNIVERSITY AVENUE STREET ADDRESS STREET ADDRESS PROVO, UTAH 84604 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE MARCO GAERTNER, DIRECTOR NAME 11242 E. PORTAL AVENUE STREET ADDRESS STREET ADDRESS MESA, AZ 85212 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ALICIA BEEKMAN, DIRECTOR NAME NAME 1970 NEW RODGERS RD. M-8 STREET ADDRESS STREET ADDRESS

12. 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 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

LEVITTOWN, PA 19056

RANIER F. MUNNS

4/29/03

Date

407-578-9696

Daytime Phone #