

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
 05-22-2001 90006 035 ***150.00

DOCUMENT # P00000004327
1. Entity Name
 Level2.com, Inc. ✓

Principal Place of Business **Mailing Address**
 800 East Cypress Creek Road
 Suite 302
 Fort Lauderdale, FL 33334

2. Principal Place of Business **3. Mailing Address**
 2101 W Commercial Blvd 2101 W. Commercial Blvd
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 Suite 3500

City & State **City & State**
 Fort Lauderdale, FL
Zip **Country** **Zip** **Country**
 33309 USA

6. Name and Address of Current Registered Agent
 Lamont & Neiman, P.A.
 One Biscayne Tower, Suite 3550
 Two S. Biscayne Blvd.
 Miami, FL 33131

4. FEI Number 65-0980667 **Applied For**
 Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
 Name:
 Street Address (P.O. Box Number is Not Acceptable)
 City: **FL** **Zip Code**

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐
FILE NOW!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State
10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Robert Jordan <input checked="" type="checkbox"/> Delete 800 E. Cypress Creek Rd #302 Fort Lauderdale, FL 33334	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Marcos Konig <input type="checkbox"/> Delete 800 E. Cypress Creek Rd. #302 Fort Lauderdale, FL 33334	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Marcos Konig' <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2101 W. Commercial Blvd #3500 Fort Lauderdale, FL 33309
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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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Marcos Konig* **4/27/001** **(54) 484-2618**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)