FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jul 17, 2003 8:00 am **Secretary of State** P00000010692 DOCUMENT # 03-05-2003 90030 013 ***150.00 1. Entity Name PONTIFAX CORP. Principal Place of Business Mailing Address 55051458 2905 BANCHORY ROAD 2905 BANCHORY ROAD WINTER PARK FL 32792 WINTER PARK FL 32792 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 59-362 1496 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE **CORAL GABLES FL 33134** Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete ☐ Addition ATKINSON, THOMAS J SR. NAME AME 2905 BANCHORY ROAD REEP ADDRESS STREET ADDRESS WINTER PARK FL 32792 Y-ST-ZIP CITY-ST-ZIP TITLE VSTD Delete TITLE ☐ Channe ☐ Addition ATKINSON, MARY J NAME NAME J905 BANCHORY ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32792 CITY-ST-ZIP TITLE ☐ Change ☐ Addition JITCE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 execuse this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

changed, or on an attachmen

Attachment# 7-14-03

To whom 11 MAY WOWAM, PODODO10692

I toner to call you AT 850-488-9000 of was told was voice message you were not talking to Any one. I then toner www, sunbia, org of it would not lounte the server.

I have this proposed for Pontiffer Corp on 3-2-03 with my check for 150. cx # 6571 insher on 10 MAROS (copy of BANK STATEMENT enclosed)

I Am RETURNING A DUPLICATE SIGNED WAY
IN the event you lost my FREST submittal.

It you have ANY ADDITIONAL pendlens - you call he as your arma is unavailable.

Key Anos Than that 407-679-0780