2001 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** FILED Russell Medic, Inc. OI MAY 29 PM 1:52 Principal Place of Business Mailing Address SECRETARY OF STATE TALLAHASSEE, FLORIDA 2. Principal Place of Business 3. Mailing Address 560 MM St. S. 560 74h St. S Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3706671 Not Applicable Harbor, +4 \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Jean Russell Street Address (P.O. Box Number is Not Acceptable) 560 745 S. Salety Harbor, FL 34695 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its egistered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOT: Registered Agent signature required when reinstating) FILE NOW! (FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be-After MAY 1, 2007 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Director / President ☐ Change Addition TITLE Delete TITLE NAME NAME Jaan M. Russell STREET ADDRESS STREET ADDRESS 560 74n St.S., Safety Harbor, FL 3469: CITY-ST-ZIP CITY-ST-7(P Delete TITLE ****150.00 ****150.00 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 n / 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 is 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:

RUSSELL MEDIA, INC. 560 SEVENTH STREET, SOUTH SAFETY HAFBOR, FLORIDA 34695

May 24, 2001

Ms. Melinda Lilliston Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Dear Ms. Lilliston

Enclosed is form UBR for 2001. Due to a clerical error and miscommunication with your office, our filing of said form has been delayed because the Corporation was cancelled in error by the Division of Corporations.

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Accordingly, please accept the enclosed report without assessment of late penalty.

Thank you,

Sincerely,

Russell Media, Inc.

Jean M. Russell

Jean Russell