FILED
Mar 26, 2002 8:00 am
Secretary of State
03-26-2002 90008 039 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000014637

1. Entity Name
PROJECT MANAGEMENT EXPERT, INC.

B00050061

Principal Place of Business	Mailing Address
100 RIALTO PLACE. SUITE 700 MELBOURNE FL 32901	100 RIALTO PLACE. SUITE 700 MELBOURNE FL 32901

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3625199 ☐ Applied F ☐ Not Applic

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PALACIOS, FERNANDO M 525 EAST STRAWBRIDGE AVE. MELBOURNE FL 32901	Name Gerald Paradis Street Address (P.O. Box Number is Not Acceptable) 100 Rialto Place Suite 700 City Melbourne FL Zip Code 32901

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 Gerald Paradis Gerald Paradis 3/12/02
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, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May be Added to Fees

11.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PARADIS, GERALD F 100 RIALTO PLACE, SUITE 700 MELBOURNE FL 32901	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Add
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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 my signature shall have the same legal effect as if made under oath; that I am an officer or directo 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 changed, or on an attachment with an address, with all other like empowered.

Gerald Paradis Gerald Paradis 3/12/02