2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
04-24-2001 90032 017 ***150.00

DOCUMENT # P00000046399

1. Entity Name

CORPWIZ CORPORATION

Principal Place of Business	Mailing Address
8300 NW 53 rd Street Suite 300 Miami, FL 33166	8300 NW 53 rd Street Suite 300 Miami, FL 33166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
8300 NW 53 rd Street		8300 NW 53 rd Street	
Suite, Apt. #, etc.: Suite 308		Suite, Apt. #, etc.: Suite 308	
City & State: Miami, FL		City & State: Miami, FL	
Zip: 33166	Country: USA	Zip: 33166	Country: USA

4. FEI Number: 59-3647943 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Wermuth, J. Michael
8300 NW 53 rd Street, Suite 300
Miami, FL 33166

7. Name and Address of New Registered Agent

Name: WERMUTHLAW, P.A.
Street Address (P.O. Box Number is Not Acceptable): 8300 NW 53 rd Street, Suite 308
City: Miami **FL** Zip Code: 33166

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: J. MICHAEL WERMUTH 4/11/01
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 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	D Wermuth, J. Michael 8300 NW 53 rd Street, Suite 300 Miami, FL 33166 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D Wermuth, J. Michael 8300 NW 53 rd Street, Suite 308 Miami, FL 33166 XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/S Wermuth, Astrid 8300 NW 53 rd Street, Suite 308 Miami, FL 33166 ☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (11/00)

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 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: J. MICHAEL WERMUTH, PRESIDENT, 04/11/01 305-715-7157
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #