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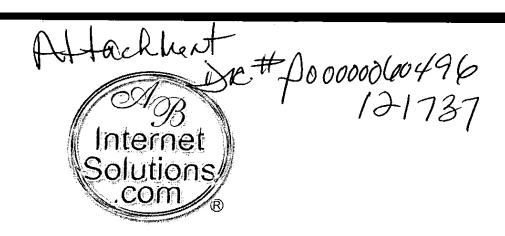
2002 UNIFORM BUSINESS REPORT (UBR)

Jul 17, 2002 8:00 am Secretary of State P00000060496 DOCUMENT # 1. Entity Name 07-17-2002 90127 013 ***150.00 AB INTERNET SOLUTIONS, INC. Principal Place of Business Mailing Address 6320 NW 175TH TERRACE 6320 NW 175TH TERRACE MIAMI LAKES FL 33015 MIAMI LAKES FL 33015 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1015525 Not Applicable \$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 TOWNSEND, MICHAEL A Street Address (P.O. Box Number is Not Acceptable) 6320 NW 175TH TERRACE MIAMI LAKES FL 33015 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition TOWNSEND, MICHAEL A NAME NAME 6320 NW 175TH TERRACE STREET ADDRESS STREET ADDRESS MIAMI FL 33015 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

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 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



July 11, 2002

Florida Department of State Division of Corporations

RE: 2002 Uniform Business Report

This letter is to inform the Department that the 2002 Uniform Business Report was not attained by AB Internet Solutions, Inc. until the filing fee was \$550. After calling the Division of Corporations they informed me to simply fill out the form and send a letter with the amount of \$150.

To Our Success,

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AB Internet Solutions, Inc.

www.ABInternetSolutions.com

Michael Anthony Townsend

Internet Strategist

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