2001 UNIFORM BUSINESS REPORT (UBR) Apr 02, 2001 8:00 am Secretary of State DOCUMENT # P0000062025 1. Entity Name INTERNATIONAL BUSINESS EXCHANGE INC. 04-02-2001 90313 023 ***158.75 Principal Place of Business Mailing Address 2601 E. OAKLAND PARK BLVD., SUITE 205 2601 E. OAKLAND PARK BLVD., SUITE 205 FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 65-10381.49 Zip Country Zip Country \$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 BRINKLEY, RICHARD 1501 E. BROWARD BLVD., SUITE 514 FT. LAUDERDALE FL 33301 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. (NOTE: 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees \mathbf{X} (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **⊠** Change ☐ Addition TITLE TITLE Delete BRINKLEY, RICHARD NAME NAME 10931 Redhawk St STREET ADDRESS 1501 E. BROWARD BLVD., SUITE 514 STREET ADDRESS Plantation, FL 33324 CITY-ST-ZIP FT. LAUDERDALE FL 33301 CITY-ST-7IP Change ☐ Addition ☐ Detete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change - Addition ☐ Delete TITLE NAME NAME 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 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME

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:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7/P

TITLE

NAME STREET ADDRESS

Richard Brinkler

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Delete

3/28/01

954-565-1555

☐ Change

☐ Addition

Daytime Phone #