2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P00000072295 **DOCUMENT#**

FILED May 05, 2003 8:00 am & Secretary of State

1. Entity Nam ADELMAN	^{ne} N GLOBAL COMMUNICATIO	NS, INC.					05-05-2003	90246 041	***150	.00	
Principal Plac 225 NE MIZNE STE 300 BOCA RATON		Mailing Address 225 NE MIZNER BLVD STE 300 BOCA RATON FL 33432	MIZNER BLVD								
2. Principal Place of Business Adelman Communications 23882 Boca Chica W								[1]	0 110(0 tilil		
Suite, Apt. #, etc. Suite, Apt. #, etc.						☐ CHECK HERE IF MAKING CHANGES					
City & Stat	RATON, FL.		BOCA RATON, FL.			4. FEI Number 65-1637162			_ 	Applied For Not Applicable	
3343	Country	^{Zip} 33433	PALN	n BEAC	<u>_t+</u>		rtificate of Status Desired	Fee Required			
			7. Name and Address of New Registered Agent								
ADELMAN, MARGARET 225 NE MIZNER BLVD STE 300						ldress (P2. fdx Number is Not Acceptable) 28 2 Boro Chica Curcle					
BOCA RA		City Bu	2CA	K	Caton:	FL	Zip Code	43.3			
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 X Margaret Adelma (NOTE: Registered Agent signature required when reinstating) 436/03 H36/03 DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND D		11.			ADDI	TIONS/CHANGES TO OFF		/- -		
TITLE Name Street address	PCEO ALDEMAN, MARGARET 225 NE MIZNER BLVD, STE 300	☐ Delete	TITLE NAME STREET	233		182	Boca Chic	a Ci	Change	Addition .	
CITY-ST-ZIP	BOCA RATON FL 33432	CA RATON FL 33432		T-ZIP	Ba	<u>(a</u>	- Raton, 4	4. 33	433		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE	ADDRESS] Change	Addition	

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.