2002 UNIFORM BUSINESS REPORT (UBR)

May 01, 2002 8:00 am Secretary of State P00000094200 DOCUMENT # 1. Entity Name 05-01-2002 91503 027 ***150.00 LIND WORLDWIDE, INC. Mailing Address Principal Place of Business 8208 ANDALUCIA COURT 8208 ANDALUCIA COURT ORLANDO FL 32836 ORLANDO FL 32836 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3673335 Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LIND, JEFFREY Street Address (P.O. Box Number is Not Acceptable) 8208 ANDALUCIA COURT ORLANDO FL 32836 Zip Code 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable. 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, 2002 Fee will be \$550.00 Added to Fees Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition Change TITLE ☐ Delete TITLE PD NAME LIND, JEFFREY NAME STREET ADDRESS 8208 ANDALUCIA COURT STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32836 CITY-ST-ZIP ☐ Addition Change Change Delete TITLE SVD TITLE LIND MOUN 10 NAME JO LIND, MOLLY 8208' ANDALUCIA COURT NAME STREET ADDRESS 8208 ANDALUCIA COURT STREET ADDRESS ORLANDO, FL 32836 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32836 ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE 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 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

JRE JEFREY (C.) LIND

FILED