2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90074 004 ***150.00

DOCUMENT # P00000102739

1. Entity Name
ROBELL INNOVATIONS, INC.

Principal Place of Business	Mailing Address
1700 SAN PABLO RD. STE 1014 JACKSONVILLE FL 32224	1700 SAN PABLO RD. STE 1014 JACKSONVILLE FL 32224

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: applied for — [X] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOBBS, NORIS Y 2783 CHESTERBROOK CT JACKSONVILLE FL 32224	Name: Ross C. Jenkins Street Address (P.O. Box Number is Not Acceptable): 6161 Arlington Expressway City: Jacksonville FL Zip Code: 32211

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: Ross C. Jenkins — 10APR01
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) [X]

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: P NAME: BELL, RODNEY D STREET ADDRESS: 1700 SAN PABLO RD, STE 1014 CITY-ST-ZIP: JACKSONVILLE FL 32224	[ ] Delete	TITLE: M NAME: Ross C. Jenkins STREET ADDRESS: 6161 ARLINGTON EXPRESSWAY CITY-ST-ZIP: Jacksonville FL 32211	[ ] Change [X] Addition
TITLE: S NAME: HOBBS, NORIS Y STREET ADDRESS: 1700 SAN PABLO RD, STE 1014 CITY-ST-ZIP: JACKSONVILLE FL 32224	[ ] Delete	TITLE: M NAME: Shelandell Dawkins STREET ADDRESS: 9727 TOUCHTON RD #908 CITY-ST-ZIP: Jacksonville FL. 32246	[ ] Change [X] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Change [ ] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] Change [ ] Addition
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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: Rodney Bell — 10 APR01 — (904) 434-2339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)