2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 24, 2001 8:00 am Secretary of State DOCUMENT # P00000103214 1. Entity Name RE TELECOM, INC. 04-24-2001 90258 019 ***150.00 Principal Place of Business Mailing Address 13301 SW 80TH RD 13301 SW 80TH RD MIAMI FL 33156 MIAMI FL 33156 2. Principal Place of Business 3. Mailing Address 3705 NW 1150 MEDIC 13301 S.W. 80 TH RD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUTTE ONE 綅 City & State Applied For City & State MIAMI PLURITA Not Applicable Zip 33/56 Country Country **\$8.75** Additional USA 5. Certificate of Status Desired \Box USA Fee Required 6. Name and Address of Current Registered Agent --7. Name and Address of New Registered Agent----Name ROHAN, PERRY C Street Address (P.O. Box Number is Not Acceptable) 13301 SW 80TH RD MIAMI FL 33156 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. DPC DV☐ Delete ☐ Change Addition TITLE TITLE MICHAEL DRUSDOWICH ROHAN, PERRY C NAME NAME 830 CORAL AIDAS DANE #ZOI 13301 SW 80TH RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COM SAMAS, FL 33071 CITY-ST-ZIP MIAMI FL 33156 TITLE Ď۷ ☐ Delete TITLE ☐ Change ☐ Addition NAME DILLON, JEFFREY NAME STREET ADDRESS 888 S ANDREWS AVE STE 203 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33316 - بايات د و محسله توDV TITLE ☐ Delete TITLE ☐ Change - ☐ Addition NAME JOHNSON, CLARK NAME STREET ADDRESS STREET ADDRESS 888 \$ ANDREWS AVE #203 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33316 ☐ 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 ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE 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.

305-773-03/8

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE