2002 UNIFORM BUSINESS REPORT (UBR)

Aug 22, 2002 8:00 am Secretary of State P00000112373 DOCUMENT # 1. Entity Name 08-22-2002 90002 025 ***550.00 WESTERN NETWORKS INC. Principal Place of Business Mailing Address DOTOROGO C/O MIRKIN & WOOLF, P.A. C/O MIRKIN & WOOLF, P.A. 1700 PALM BEACH LAKES BLVD 1700 PALM BEACH LAKES BLVD WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 50-0002755 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MIRKIN, MARK H ESQ Street Address (P.O. Box Number is Not Acceptable) C/O MIRKIN & WOOLF, P.A. 1700 PALM BEACH LAKES BLVD #580 WEST PALM BEACH FL 33401 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 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 September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE ☐ Change ☐ Addition BRODIE, IAN S NAME 1010 BEACH AVENUE 701 STREET ADDRESS STREET ADDRESS VANCOUVER BC CANADA V6C 1T7 CITY-ST-ZIF CITY-ST-ZIP TITLE D Delete TITLE Change ☐ Addition NAME JARDINE, BRENT NAME 140 E 27TH STREET STREET ADORESS STREET ADDRESS N VANCOUVER BC CANADA V6C -1T7 CITY-ST-ZIP CITY-ST-ZIP D ----TITI F ☐ Delete TITLE - - - Change -- - Addition MORRICE, SCOTT NAME NAME 13554 WOODCREST DRIVE STREET ADDRESS STREET ADDRESS SURREY BC CANADA V4P 1W6 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME

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 addres

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ang 16102 (604) XBB-400

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