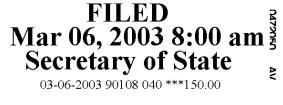
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000044895 **DOCUMENT #**

SIGNATURE:

. Entity Name IBEHOUSE COMMUNCIATION	IS, INC.	į	
rincipal Place of Business	Mailing Address	SUITE OOG	





TAMPA FL 3	33647 TAMPA FL 33647											
2. Principal Place of Business			3. Mai	3. Mailing Address								
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City.& Sta	city & State City & State							4 . Fl	El Number 59-37.15554	/	Applied For	
Zip		Country	Zip	Zip Cou				5. C	Not <u>Applicable</u> dditional			
	6. Name and Address of Current Registered Agent							5. Certificate of Status Desired Fee Required				
			registere	- Agont	· ·	7. Name and Address of New Registered Agent Name						
DAVIS, MELLANE 15215 AMERLY DRIVE SUITE 906 TAMPA FL 33647					Street Address (P.O. Box Number is Not Acceptable)							
٤						City · FL Zip Code						
3. The above	e named entity ations of registe	submits this statement for	or the purp	ose of changing its	registere	ed office or re	gistered	age	nt, or both, in the State of Florida. I ar	n familiar with	n, and accept	
SIGNATURE		or printed name of registered agent	and side of annu	- NOTE								
···			and title if appl	icable. (NOTE:	: Hegistered	d Agent signature r	required wh	en rein	ostating) DATE			
	r-May 1-200	! FEE IS \$150.00 3-Fee.will be \$550.00. Florida Department o	l Stote					_ _	Election Campaign Financing Trust Fund Contribution	\$5.	00 May Be	
IO.	r ayabic to	OFFICERS AND		20	1 44					-		
TITLE	DST	OFFICERS AND	DIRECTOR	TS	11.	 1		ADD	DITIONS/CHANGES TO OFFICERS AF			
NAME STREET ADDRESS CITY-ST-ZIP	DAVIS, MEI 15215 AMB TAMPA FL	ierly drive, suite 9	06	,	NAME STREE					☐ Changè	☐ Addition (
ITLE IAME TREET ADDRESS ITY-ST-ZIP	DP DAVIS, MIC 15215 AMB TAMPA FL	ERLY DRIVE SUITE 90	16	Delete						☐ Change	☐ Addition	
ITLE HAME ITREET ADDRESS HTY-ST-ZIP				☐ Delete		J			, a	☐ Change	☐ Addition	
ITLE IAME TREET ADDRESS ⁻ ITY-ST-ZIP			· <u></u>	☐ Delete		T ADDRESS ST-ZIP	-	Porte p	والمسائد المسائدة	☐ Change	☐ Addition	
TLE AME TREET ADORESS TY-ST-ZIP				☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS ST-ZIP				☐ Change	☐ Addition	
TLE AME TREET ADDRESS TY-ST-ZIP			7.	☐ Delete	TITLE NAME STREET	FADDRESS ST-ZIP				☐ Change	Addition	
of the con	poration or the	or audoremental report is	weren to o	ccurate and that my	he exem	ption stated i	the cam		9.07(3)(i), Florida Statutes. I further ce gal effect as if made under oath; that I statutes; and that my name appears	am an officer in Block 10 o		