FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91366 045 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

000096955

DOCUMENT # P01000058859

1. Entity Name
POWERBUYER, INC.

Principal Place of Business	Mailing Address
3656 - 60TH STREET NORTH ST. PETERSBURG, FL 33710 US	3656 - 60TH STREET NORTH ST. PETERSBURG, FL 33710 US

2. Principal Place of Business	3. Mailing Address
4890-122nd Ave N	4890-122nd Ave N
Suite, Apt. #, etc.: #2	Suite, Apt. #, etc.: #2
City & State: Clearwater, FL	City & State: Clearwater FL
Zip: 33762 Country: USA	Zip: 33762 Country: USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 59-3724656 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MEMMER, SHARON E
3656 - 60TH STREET NORTH
ST. PETERSBURG, FL 33710

7. Name and Address of New Registered Agent

Name: Thomas J Pridham
Street Address (P.O. Box Number is Not Acceptable)
12399-169th St
City: Largo FL Zip Code: 33773

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: Thomas Pridham 4/24/03
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
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MEMMER, SHARON E 3656 - 60TH STREET NORTH ST. PETERSBURG, FL 33710	☒ Delete	P Pridham Thomas 12399-169th St Largo, FL 33773	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST MEMMER, MARK A 3656 - 60TH STREET NORTH ST. PETERSBURG, FL 33710	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas Pridham 3/12/03 727-344-6275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #