2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000086391

Entity Name: MAILROUTE INC

Current Principal Place of Business:

1340 NW 196 STREET
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

1340 NW 196 STREET
MIAMI, FL 33169

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1000 WEST AVENUE, SUITE 1114
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CAMPBELL, COURTNEY II
Address: 1340 NW 196 ST.
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete
Name: BURSE, VICTOR
Address: 1340 NW 196 STREET
City-St-Zip: MIAMI, FL 33169

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CAMPBELL, COURTNEY II
Address: 1340 NORTHWEST 196TH. STREET
City-St-Zip: MIAMI, FL 33169

Title: D (X) Change ( ) Addition
Name: BROWN, GEOFFREY
Address: 19125 NORTHWEST 11TH COURT
City-St-Zip: MIAMI, FL 33169

Title: T ( ) Change (X) Addition
Name: BROWN, GEOFFREY
Address: 19125 NORTHWEST 11TH COURT
City-St-Zip: MIAMI, FL 33169 US

Title: S ( ) Change (X) Addition
Name: JOILES, MELISSA
Address: 1340 NORTHWEST 196TH STREET
City-St-Zip: MIAMI, FL 33169 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEOFFREY BROWN D 02/25/2002

Electronic Signature of Signing Officer or Director — Date