FILED

SIGNATURE:

Aug 07, 2002 8:00 am Secretary of State 2002 UNIFORM BUSINESS REPORT (UBR) 07-23-2002 90330 036 ***150.00 P01000097771 DOCUMENT # 1. Entity Name CINFUSION, INC. 40930. Principal Place of Business Mailing Address 114 BENT ARROW DRIVE STE D 114 BENT ARROW DRIVE STE D JUPITER FL 33458 JUPITER FL 33458 Principal Place of Business Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Regis 7.-Name and Address of New Registered Agent HABER, DANIEL Street Address (P.O. Box Number is Not Acceptable) 114 BENT ARROW DRIVE STE D JUPITER FL 33458 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. (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. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDIT ONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (4/02)TITLE ☐ Delete TITLE Change ☐ Addition NAME HARBER, DANIEL NAME 114 BENT ARROW DRIVE STE D STREET ADDRESS STREET ADDRESS **CR2E034** JUPITER FL 33458 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP -TITLE Delete TITLE Change ___ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Dalete 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 IIILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-57-7/P 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 path; that I am an officer or director of the corporation or the receiver or frustee empowered to exacute 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.

Attorchments #PO1000097771

July 10, 2002

Division of Corporations Uniform Business Report Filing P.O. Box 1500 Tallahassee, FL 32302-1500

Cinfusion Inc. 8659 Wakefield Drive Palm Beach Gardens, FL 33410

To Whom It May Concern:

RE: Cinfusion Inc.

I have enclosed a check for \$150.00. I have moved from the prior address and did not receive the prior form. I have filled out the form and added my company's new address. Please accept my apologies and this will not happen again. Please call me @ 561-596-8557 if you have any questions

Sincerely, Jan Hall Daniel Haber President