2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003
Secretary of State

DOCUMENT# P01000107948

Entity Name: WIDESCOPE DISTRIBUTORS, INC.

Current Principal Place of Business:

212 LAKE POINTE DRIVE
#113
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

6040 S SABLE CIRCLE
MARGATE, FL 33063

Current Mailing Address:

212 LAKE POINTE DRIVE
#113
FT. LAUDERDALE, FL 33309

New Mailing Address:

6040 S SABLE CIRCLE
MARGATE, FL 33063

FEI Number: 65-1150882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, JOEL
212 LAKE POINTE DRIVE
113
FT. LAUDERDALE, FL 33309

Name and Address of New Registered Agent:

MILLER, JOEL
6040 S SABLE CIRCLE
MARGATE, FL 33063

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: _____ 05/01/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: LINWOOD, NADINE C
Address: 212 LAKE POINTE DRIVE #113
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: P ( ) Delete
Name: MILLER, JOEL M
Address: 212 LAKE POINTE DRIVE #113
City-St-Zip: FT. LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition
Name: LINWOOD, NADINE C
Address: 6040 S SABLE CIRCLE
City-St-Zip: MARGATE, FL 33063

Title: P (X) Change ( ) Addition
Name: MILLER, JOEL M
Address: 6040 S SABLE CIRCLE
City-St-Zip: MARGATE, FL 33063

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: NADINE LINWOOD VP 05/01/2003
Electronic Signature of Signing Officer or Director — Date