

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91300 011 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000009825			
1. Entity Name IES, INTERNET EBUSINESS SOLUTIONS, INC.			
Principal Place of Business 13790 NW 4TH ST SUITE 111 SUNRISE, FL 33325		Mailing Address 2484 QUAIL ROOST DRIVE WESTON, FL 33327	
2. Principal Place of Business 2500 Weston Road Suite, Apt. #, etc. 312		3. Mailing Address 2566 Mayfair Lane Suite, Apt. #, etc. Weston	
City & State Weston		City & State Weston	
Zip 33331	Country Broward	Zip 33327	Country Broward
4. FEI Number 02-0537483		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARZBAN, ALANNA 2484 QUAIL ROOST DRIVE WESTON, FL 33327		7. Name and Address of New Registered Agent Name Marzban Alanna Street Address (P.O. Box Number is Not Acceptable) 2566 Mayfair Lane City Weston FL Zip Code 33327	
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 <u>Alanna Marzban</u> DATE <u>4/21/2003</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when appointing)			
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		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
P MARZBAN, ALANNA 2484 QUAIL ROOST DRIVE WESTON, FL 33327		☐ Change ☐ Addition	
Y MARZBAN, SAEID 2484 QUAIL ROOST DRIVE WESTON, FL 33327		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
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☐ Delete		☐ Change ☐ Addition	
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: <u>Saeid Marzban</u>		Date <u>4/21/2003</u> Daytime Phone # <u>954-609-6220</u>	

11024090



☒ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)