2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P02000010867 **DOCUMENT#**

1. Entity Name

MCLEOD HOLDINGS, INC.

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FILED May 05, 2003 8:00 am Secretary of State

05-05-2003 90311 031 ***150.00

| PRINCIPLE PRICE OF BLADWISS AND A REVO. E PALM HARBOR FL 34694 2. Principal Pitics of Business Suite, Apt. V. etc. City & Steam RESCH, AARON M 4846 LAKE VALENCIA BUVD, E PALM HARBOR FL 34684 City FLL Zer Code City FLL Zer Co | | | | | | | THE WE IS | | | | | | |
|--|---|------------------------|----------------------|--------------|--------------------|--------------------------|-----------|------|-------------------------------|-----------------------------------|---------------|----------|--|
| Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City State Country Applied For Number Country Applied For Number Country Country Country Applied For Number Country Country Country Country Country S. Centificate of Status Desired \$ 5.75 Additional For Registered Agent Number RISCH, ARNA M 4846 LAKE VALENCIA BLVD, E. PALM HARBOR Ft. 34684 City Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) FL Zio Code City FL Zio Code City FL Zio Code Street Address of registered agent, or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent, or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent, or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent, or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. I am familiar with, and acceptate the obligations of registered agent or both, in the State of Florida. FILE NOW! FILE ROW!! The State of Row Both Description of Registered Agent registered agent or both, in the State of Florida. PSD Address (P.O. Box Number is Not Acceptable to Port Internation or Registered Agent registered agent or both in the State of Florida. | 4846 LAKE VALENCIA BLVD., E. | | | | LAKE VALENCIA BL | | | | | | | | |
| City & State Ci | 2. Principal Place of Business | | | | 3. Mailing Address | | | | <u> </u> | ii ee iii eele i ii | HA BANAA KUKN | | |
| ENCH, AARON M FISCH, AARON M AND Street Address of Current Registered Agent FISCH, AARON M ASSET SA Additional FISCH, AARON M ASSET SA ASSET SA ADDRESS OF SET AUGUS STREET ANDRESS OF S | Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | | 1 | CHECK HERE | IF MAKING | CHANGES | | |
| S. Name and Address of Current Registered Agent S. Name and Address of New Registered Agent FISCH, AARON M 4846 LAKE VALENCIA BIVD., E. PALM HARBOR FL 34684 City City FL City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the chligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2009 Fee will be \$550.00 Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ITLE MAKE SITIEST ADDRESS CITY-ST-2P PALM HARBOR FL 34684 TITLE MAKE SITIEST ADDRESS CITY-ST-2P CITY-ST-2P TITLE MAKE SITIEST ADDRESS CITY-ST-2P CITY-ST-2P TITLE MAKE SITIEST ADDRESS CITY-ST-2P TITLE MAKE SITIEST ADDRESS CITY-ST-2P TITLE MAKE SITIEST ADDRESS CITY-ST-2P CI | City & State | 9 | ··· <u>·</u> ···· | City | City & State | | | 4. | FEI Number | | | | |
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| Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable in Plot Acceptable is Not Acceptable in Plot Acceptable in Plot Acceptable in P | | 6. Name | and Address of Curre | nt Registere | ed Agent | | | 7. [| Name and Address of New Ro | egistered Ad | ent | | |
| FISCH, AARON M 4846 LAKE VALENCIA BLVD, E. PALM HARBOR FL 34684 City FL Zip Code C | | | | | | | Name | | | | | | |
| PALM HARBOR FL 34884 8. The aboven named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am farmillar with, and accept the collegations of registered agent agent agent agent agent agent and title it are placed agent. Repaired agent agent agent agent and title it are placed agent | • | | | | | : | | | | | | | |
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| FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 May Ba Added to Fees 10. | | | | | | | | | | | | | |
| After May 1, 2003 Fee will be \$550.00 May Be Added Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE PSD PSCH, AARON M | SIGNATURE | | | | | | | | | | | | |
| 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PSD FISCH, AARON M STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34684 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Change Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | After May 1, 2003, Fee will be \$550.00 9. Election Campaign Financing \$5.00 May B | | | | | | | | | | | | |
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interest certify that the miormation supplied with this filling 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