2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Sep 10, 2001 08:00 AM P94000072762 DOCUMENT# 1. Entity Name **Secretary of State** TNT ONLINE, INC. Principal Place of Business Mailing Address 4531 DELEON ST 4531 DELEON ST 207 FORT MYERS FLFORT MYERS FL 33907 33907 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0524114 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHENKO, WILLIAM E. JR. 2801-C ESTERO BLVD. Street Address (P.O. Box Number is Not Acceptable) FT. MYERS BEACH FL33931 US 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. 09/10/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE X Delete TITLE ☐ Addition MAME SOURES KIM A NAME 4531 DELEON ST #207 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33907 CITY-ST-ZIP D ☐ Delete TITLE ☐ Change NAME WIGGINTON JAY \mathbf{E} NAME STREET ADDRESS 4531 DELEON ST #207 STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33907 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

09/10/2001

Daytime Phone #

Date

SIGNATURE: __Jay E. Wigginton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)

SUSAN DAVIDSON, SECRETARY 4531 DELEON ST 207 FORT MYERS, FL 33907

RANDY S BERG, VP 4531 DELEON ST 207 FORT MYERS, FL 33907