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2002 UNIFORM BUSINESS REPORT (UBR)

Feb 19, 2002 8:00 am Secretary of State **DOCUMENT #** P95000007807 1. Entity Name 02-19-2002 90123 016 ***150.00 EARTH STATION ONE, INC. Principal Place of Business Mailing Address 874 DIXON BLVD 874 DIXON BLVD **COCOA FL 32922** COCOA FL 32922 2. Principal Place of Business 3. Mailing Address 10 N. SUMMERLIN AVE P.D. BOX 530052 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE UNIT City & State Applied For City & State 4. FEI Number 59-3365804 Not Applicable ORLANIDO \$8.75 Additional 5. Certificate of Status Desired 32853-0052 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GARDNER, WINSTON W JR Street Address (P.O. Box Number is Not Acceptable) 874 DIXON BLVD COCOA FL 32922 Zip Code City 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 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 May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Delete TITLE NAME NAME GARDNER, WINSTON W JR 10 N. SUMMERLIN AVE; UNIT #3 STREET ADDRESS STREET ADDRESS 1827 BIMINI DR CITY-ST-7IP CITY-ST-ZIP ORLANDO, FL 32801 ORLANDO FL 32853-0052 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME KIRSCHENBAUM, MALCOLM NAME STREET ADDRESS STREET ADDRESS 72 COUNTRY CLUB ROAD CITY-ST-7IP CITY-ST-ZIP COCOA BEACH FL 32931 Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TIT: F Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

NINISTON W. GARDNER, Jr. 2/2/02 407-254-5370

R OR DIRECTOR

Dayton Phone *