2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P95000028128 Apr 12, 2000 8:00 am 1. Entity Name Secretary of State INTERNATIONAL MEDIA HOLDINGS, INC. 04-12-2000 90039 038 ***150.00 Principal Place of Business Mailing Address 9799 St. Augustine Rd Jacksonville, FL 32257 ULIOPOUL 17 2. Principal Place of Business 3. Mailing Address 9799 Old St. Augustine Rd Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Jacksonville, FL City & State City & State Applied For 4. FEL Number Jacksonville, FL Not Applicable 59-3307487 Zip Country \$8.75 Additional 5. Certificate of Status Desired 32257 US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MOTOLAW, INC. Street Address (P.O. Box Number is Not Acceptable) 50 North Laura Street Suite 2750 Jacksonville, FL 32202 City Zin 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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, 2000 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **XX**Addition D TITLE D Change TITLE **XX**Delete LeGrand, Ron 9799 Old St. Augustine Road Casey, Shawn M. 9799 St. Augustine Road NAME NAME STREET ADDRESS STREET ADDRESS Jacksonville, FL Jacksonville, FL CITY-ST-ZIP CITY-ST-7IP XX Change ☐ Addition ☐ Delete TITLE Reecher, David A. Reechee, David NAME NAME 9799 Old St. Augustine Road STREET ADDRESS STREET ADDRESS Jacksonville, FL CITY-ST-ZIP CITY-ST-ZIP XX Delete **XX**Addition Change TITLE Pena, Daniel S. Sr. Rach, Raymond NAME NAME 9799 St. Augustine Road 9799 Old St. Augustine Road STREET ADDRESS STREET ADDRESS Jacksonville, FL Jacksonville, FL CITY-ST-ZIP CITY-ST-ZIP **XX**Change Addition TITLE Delete TITLE Alvarez, Jose A. 9799 Old St. Augustine Road Alvarez, Jose A. 9799 St. Augustine Road NAME NAME STREET ADDRESS STREET ADDRESS Jacksonville, FL CITY-ST-ZIP Jacksonville, FL CITY-ST-ZIP Addition **XX**Delete ☐ Change TITLE TITLE Nicholas, Ted NAME NAME 9799 St. Augustine Road STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Jacksonville, FL 32257 Addition Change TITLE **XX**Delete TITLE Hugh, Carey L. NAME NAME 9799 Old St. Augustine Road STREET ADDRESS STREET ADDRESS CITY-ST-7IP Jacksonville, FL 32257 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 life empowered. Jose A. Alvarez,

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SI

G OFFICER OR DIRECTO