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

05-05-2003 90164 028 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000040025

1. Entity Name
MEGABYTE PUBLISHING, INC.

Principal Place of Business
4033 SW 2ND ST
PLANTATION, FL 33317

Mailing Address
P.O. BOX 15937
PLANTATION, FL 33318 US

2. Principal Place of Business		3. Mailing Address	
5309 W. Broward Blvd		5309 W. Broward Blvd	
Suite, Apt. #, etc. #237		Suite, Apt. #, etc. 237	
City & State Plantation FL		City & State Plantation FL	
Zip 33317	Country US	Zip 33317	Country US

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0586956 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAUR, THERESA D
4033 SW 2ND ST.
PLANTATION, FL 33317

7. Name and Address of New Registered Agent

Name Theresa D. Baur
Street Address (P.O. Box Number Is Not Acceptable) 5309 W. Broward Blvd
#237
City Plantation FL Zip Code 33317

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 Theresa D. Baur Theresa D. Baur President 4/28/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	P BAUR, THERESA D 4033 SW 2ND ST. PLANTATION, FL 33317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Theresa D. Baur 5309 W. Broward Blvd, #237 Plantation FL 33317	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/02)

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: Theresa D. Baur Theresa D. Baur President 4/28/03 954-605-6059
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #