2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2000 8:00 am
Secretary of State
01-28-2000 90123 024 ***158.75

DOCUMENT # P96000008188

1. Entity Name

LEGALCLUB.COM, INC.

Principal Place of Business	Mailing Address
1500 NW 62ND ST SUITE 404 FORT LAUDERDALE FL 33309	1500 NW 62ND ST SUITE 404 FORT LAUDERDALE FL 33309-1851

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1601 N. HARRISON PARKWAY	1601 N. HARRISON PARKWAY
Suite, Apt. #, etc.: Bldg. A, Suite 200	Suite, Apt. #, etc.: Bldg. A, Suite 200
City & State: SUNRISE, FL.	City & State: SUNRISE FL.
Zip: 33323 Country: USA	Zip: 33323 Country: USA

4. FEI Number 65-0640975 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MERL, BRETT
1500 NW 62ND ST
SUITE 404
FORT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name: BRETT MERL
Street Address (P.O. Box Number is Not Acceptable): 1601 N. HARRISON PARKWAY
Bldg. A, Suite 200
City: SUNRISE **FL** Zip Code: 33323

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)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCEO MERL, BRETT 10213 VESTAL COURT CORAL SPRINGS FL 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO, D MERL, BRETT 10213 VESTAL COURT CORAL SPRINGS, FL. 33071	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MERL, BRETT 10213 VESTAL COURT CORAL SPRINGS FL 33071	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT CAMPANARO, RICHARD One Ocean Ridge COURT Ponte Verda Beach, FL. 32082	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV KROUSE, JASON 1885 PALM COVE BLVD #203 DELRAY FL 33445	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD COHEN, MATT 19662 ESTUARY DRIVE BOCA RATON FL 33498	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO SAMACH, MICHAEL 315 PALM BOULEVARD WESTON, FL. 33326	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

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.

SIGNATURE: _____ Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR