

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000052403

FILED
Oct 06, 2004
Secretary of State

Entity Name: IBSG INTERNATIONAL, INC.

Current Principal Place of Business:

2700 NORTH 29TH AVE
SUITE 305
HOLLYWOOD, FL 33020

New Principal Place of Business:

1132 CELEBRATION BLVD
CELEBRATION, FL 34747

Current Mailing Address:

2700 NORTH 29TH AVE
SUITE 305
HOLLYWOOD, FL 33020

New Mailing Address:

1132 CELEBRATION BLVD
CELEBRATION, FL 34747

FEI Number: 65-0705328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKER, MARC
2700 NORTH 29TH AVE
SUITE 305
HOLLYWOOD, FL 33202 US

Name and Address of New Registered Agent:

FOWLER WHITE BURNETT
100 SOUTHEAST SECOND STREET
17TH FLOOR
MIAMI, FL 33131 US

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: FRED LICKSTEIN

10/06/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BAKER, MARC
Address: 2700 NORTH 29TH AVENUE SUITE 305
City-St-Zip: HOLLYWOOD, FL 33020

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: BIRCH, GEOFFREY MR.
Address: 1132 CELEBRATION BLVD
City-St-Zip: CELEBRATION, FL 34747

Title: CEO () Change (X) Addition
Name: RIVERS, MICHAEL DR.
Address: 1132 CELEBRATION BLVD
City-St-Zip: CELEBRATION, FL 34747

Title: DIR () Change (X) Addition
Name: JOLLY, ROBERT MR.
Address: 1132 CELEBRATION BLVD
City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. M. RIVERS

CEO

10/06/2004

Electronic Signature of Signing Officer or Director

Date