2001 UNIFORM BUSINESS REPORT (UBR)					FILED			
DOCUMENT # P9600093056 1. Entity Name					Apr 23, 2001 8:00 am Secretary of State			
ARBITRATION RESOURCES, INC.						01 90002 003 ***15		
Principal Plac	pe of Business	Mailing Address						
1979 Brandywine RD 108		PMB 290 931 VILLAGE BLVD #905						
WEST PALM BEACH FL 33409		WEST PALM BEACH FL 33409			I (BANGON (NE NOMA ONIN ERMIN ERM	(1 - 1 11) - 1 11 - 111 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 1 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11	HILL BUIL HERK	
2. Principal Place of Business 720 S. SAPDDILLA AVE		3. Mailing Address						
Suite, Apt. #, etc. Pは		Suite, Apt. #, etc. Po 80× 968			DO NOT WRITE IN THIS SPACE			
City & Stat W FAL	n beach, FL	City & State W. PALM BE	ACH, FL		4. FEI Number 65-071976	,, ⊢ −	applied For lot Applicable	
334°	Country U S A	Zip 33402	Country		5. Certificate of Status Desired	□ \$8.75 Ad Fee Require		
	6. Name and Address of Current	Registered Agent	Name	7	. Name and Address of New	Registered Agent		
LIIDIE MADK I				RK	T. LURIE D. Box Number is Not Acceptab			
1979 BRANDYWINE RD				odress (P.C	SAPBDILLA	AVE		
APT 108 WEST PALM BEACH FL 33409 PH ##					4			
				ALM	BEACH	FL Zip Coo	de Loi	
8. The above	named entity submits this statement for	the purpose of changing it			agent, or both, in the State of F	lorida.		
SIGNATURE	MARK Signature, typed or printed name of registered agent a	nd title if applicable. (NO	TE: Regist red Agent signate	ure required whi	en reinstating)	4/15/6 DATE	<u> </u>	
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.		/!!! FEE IS \$150.i 001 Fee will be \$5 ible to Departmen	50.00	10. Election Campaign F Trust Fund Contributi		00 May Be ed to Fees	
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO OF			
TITLE	DPT Lurie, Mark I	☐ Delete	TITLE NAME	MAR	A 1 1	Change	Addition	
NAME STREET ADDRESS	1979 BRANYWINE RD, APT 108		STREET ADDRESS	720	5. SAPODI LUA			
CITY-ST-ZIP	WEST PALM BEACH FL 33409		CITY-ST-ZIP	U · F	PALM BEACH			
TITLE Name	VS LURIE, KAROL JANE	☐ Delete	TITLE NAME	KAR	S. SAPODICE	Change AUK PH	Addition A	
STREET ADDRESS CITY-ST-ZIP	1979 BRANDYWINE RD WEST PALM BEACH FL 33409		STREET ADDRESS CITY-ST-ZIP		PALM BEACH,			
TITLE	WEST FALL BETOTTE SOTO	Delete	FITTLE GT TO THE			Change	Addition	
NAME			NAME Street Address					
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP				ŀ	
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS			NAMÉ STREET ADDRESS					
CITY-ST-ZIP			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 like empowered.

SIGNATURE: 🚄

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR