FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000097336 (7)

REALEADS U.S.A., INC.

Principal Place of Business Mailing Address

FILED Feb 26 1998 8:00am Secretary of State



B751 BROWARD BOULEVARD 8751 BROWARD BOULEVARD 5TH FLOOR 5TH FLOOR DO NOT WRITE IN THIS SPACE PLANTATION FL 33324 PLANTATION FL 33324 3. Date Incorporated or Qualified 11/27/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0714780 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 Country Zio Country Zın This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name **FOLEY & SADLER** 200 LAURA STREET Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32202 83 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and little if apply able ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DPST DELETE ☐ Change TITLE 1.1 TITLE WERNER, SETH 12 NAME NAME 8751 BROWARD BLVD. 5TH FLOOR 1.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 31 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-SF-ZIP Change Addition DELETE TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELE1E TITLE 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6 1 TITLE Change Addition TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not of this exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ennual report or supplienental annual 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 true de enquived to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental annual report is true officer or director of the corporation or the receiver or true of employed an attachment with an additional properties.

SIGNATURE: Seth Werner

2/12/98

954-452-0000