2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P97000037659 Apr 22, 2000 8:00 am Secretary of State WAIMEA GOLD, INC. 04-22-2000 90001 019 ***150.00 Principal Place of Business Mailing Address 720 N DR MELBOURNE FL 32934-9281 MELBOURNE FL 32934-9281 2. Principal Place of Business 3. Mailing Address 720 North Drive 720 North Drive Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Melbourne, FL 32934-9281 City & State Melbourne, FL 32934-9281 4. FEI Number Applied For 65-0747423 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent John B. McCracken MC CRACKEN, JOHN B Street Address (P.O. Box Number is Not Acceptable) 720 N DR 505 South Flagler Drive MELBOURNE FL 32934-9281 Suite 1100 ^{Ci}West Palm Beach, Zip §3401 FL 8. The above named entity submits statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. John B. McCracken, Registered Agent²/28/00 SIGNATURE Signature, typed or printed (NOTE. Registered Agent signature required when reinstating) ne of registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete x X Change ☐ Addition MURFEY, SPENCER L III NAME MURFEY, SPENCER L. III NAME STREET ADDRESS 3460 FAIRLANE FARMS ROAD, SUITE 7 STREET ADDRESS 720 North Drive CITY-ST-ZIP WEST PALM BEACH FL 33414 CITY-ST-ZIP Melbourne, FL 32934-9281 TITLE ☐ Delete TITLE XXChange ☐ Addition BURCIAGA, JOSEPH BURCIAGA, JOSEPH NAME NAME 3609 WASHINGTON ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP WEST PALM BEACH FL 33405 CITY-ST-ZIP TITLE Delete TITLE XAddition Change NAME BALDONI, IDEAL F. NAME STREET ADDRESS STREET ADDRESS 1032 Island Manor Drive CITY-ST-ZIP CITY-ST-ZIP West Palm Beach, FL 33413 ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS ST-719 CITY-ST-ZIP i3. 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 receive for 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 application.

2/28/00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-242-1900

Daytime Phone #

Date