## 2001 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P97000053756 Feb 20, 2001 8:00 am Secretary of State 1. Entity Name OPEN ACCESS, INC. 02-20-2001 90092 006 \*\*\*150.00 Principal Place of Business Mailing Address 10275-COLLING AVE. 10275 COLLINS AVE. 1218 BAL HARBOUR FL 33154 BAL HARBOUR FL 33154 US 3. Mailing Address Y/O/ Ravens wood Road Principal Place of Business Ravenswood Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number 65-0766701 Applied For Not Applicable Country U.S.A \$8.75 Additional 5. Certificate of Status Desired 331) Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BENHAMOU, ROGER Street Address (P.O.Box Number is Not Acceptable) 10275 COLLINS AVE. 1218 BAL HARBOUR FL 33154 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 Goldis - Accountant FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition **Change** TITLE ☐ Defete TITLE BENHAMOU, ROGER 4101 Ravenswood Rd., Suite III NAME NAME STREET ADDRESS 10275 COLLINS AVE # 1218 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BAL HARBOUR FL 33154** ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition -Delete -TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change TITLE □ Delete NAME NAME STREET ADDRESS 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: /