FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 28, 2002 8:00 am Secretary of State P97000060329 DOCUMENT # Entity Name 05-28-2002 91686 010 ***150.00 WEATHER SITE, INC. Mailing Address Principal Place of Business 1390 S. DIXIE HWY.. STE 2213 1390 S. DIXIE HWY., STE 2213 CORAL GABLES FL 33146 CORAL GABLES FL 33146 3. Mailing Address 2. Principal Place of Business 8431 SW 6175 NW DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Soite- 225 Applied For 4. FFI Number City & State City & State 65-0772796 Not Applicable Miani Mian! \$8.75 Additional Zip 5. Certificate of Status Desired 33/89 30. Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MOOREFILED, HAROLD D JR Street Address (P.O. Box Number is Not Acceptable) % STEARNS, WEAVER & MILLER, ET AL 150 WEST FLAGLER STREET., STE 2200 225 **MIAMI FL 33130** City its this statement for the ourpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above name, SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After May 1, 2002 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 11. ☐ Addition **Change** TITLE ☐ Delete TITLE JACKMAN Philip NAME JACKMAN, PHILIP NAME SW 201 street STREET ADDRESS 1390 S. DIXIE HWY., STE 2213 STREET ADDRESS 33189 CITY-ST-ZIP CORAL GABLES FL 33146 CITY-ST-ZIP Addition **Change** ☐ Delete TITLE TITLE TACK E. Doninik NAME DOMINIK, JACK 54-225 NAME 15319 6175 STREET ADDRESS 6175 NW 153RD STREET., STE 225 STREET ADDRESS 33014 LAKES CITY-ST-ZIP MIAMI LAKES FL 33014 CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TD TITLE NAME JANUS, HENRY L NAME STREET ADDRESS 6396 NW 23RD TERRACE STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33496** CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filling 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 trusted employeed 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.

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

☐ Delete

☐ Delete

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 2,2002 305556 700

☐ Addition

☐ Addition

Change

☐ Change