2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # P97000081341 May 03, 2000 8:00 am 1. Entity Name Secretary of State AUCTION WORLD, INC. 05-03-2000 90086 037 ***150.00 Principal Place of Business Mailing Address 1432 COTTONWOOD TRAIL 1432 COTTONWOOD TRAIL SARASOTA FL 34232 SARASOTA FL 34232-3439 COBBOO 2. Principal Place of Business 3. Mailing Address 7722 US Open Loop 7722 US Open Loop Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0791049 Bradenton, FL Not Applicable Bradenton, FL \$8.75 Additional Zip Country Country Zip 5. Certificate of Status Desired 34202 USA 34202 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Mark S. Henderson HENDERSON, KELLEY J Street Address (P.O. Box Number is Not Acceptable) 7722 US Open Loop 1432 COTTONWOOD TRAIL SARASOTA FL 34232 City Bradenton 34202 ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above n 4/21/2000 Mark S. Henderson SIGNATURE ent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. X Change Addition X Delete TITLE TITLE President HENDERSON, KELLY J Mark S. Henderson NAME NAME 7722 US Open Loop FL 34202 1432 COTTONWOOD TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34232 ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the inform indicated on this report or su of the corporation or the regard pl∉menta changed, or on an attach