1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000084837

Country

9. Name and Address of Current Registered Agent

25

WUNDERLICH, ERIC G

11911 NW 28TH ST **CORAL SPRINGS FL 33065**

1. Corporation Name

IWBB US1 CORP.

Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

24

Zip

Principal Place of Business

9483 S DIXIE HWY MIAMI FL 33156

Mailing Address

11911 NW 28TH ST

2a, Mailing Address

26

27

28

29

9483

City & State

Suite, Apt. #, etc.

MIAM

CORAL SPRINGS FL 33065

DIXIE HWY

Country

81

82

83

ERIC

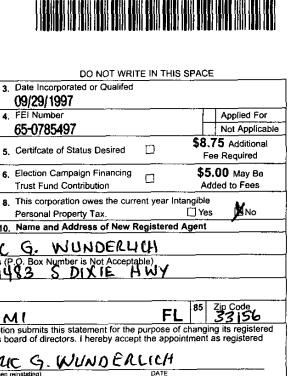
Street Address

FLORIDA

30

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90166 013 ***150.00



MIAMI 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 Florida. 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 Statytes. EMC G. WUNDERLICH ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. 🗶 Change Addition DELETE 1.1 TITLE TITLE ERIC G. WUNDERLICH WUNDERLICH, ERIC G 1.2 NAME NAME 9483 S. DIXIE HWY 11911 NW 28TH ST 1.3 STREET ADDRESS STREET ADDRESS 33156 **CORAL SPRINGS FL 33065** MIAMS FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 C/TY-ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if char address, with all other like empowered.

SIGNATURE:

R2E034 (11/98)