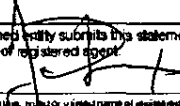
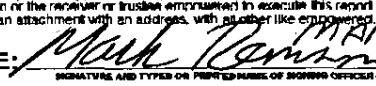


FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90828 001 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000094868			
1. Entity Name MAD INVESTMENTS, INC.			
Principal Place of Business 3555 S. OCEAN BLVD., 417 PALM BEACH, FL 33480		Mailing Address 3555 S. OCEAN BLVD., 417 PALM BEACH, FL 33480	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 05-0830499		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PAKMAN, JOHN T ESQ 1601 FORUM PL #301 WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name JOHN T. PAKMAN Street Address (P.O. Box Number is Not Acceptable) 1832 NORTH DIXIE HIGHWAY City LAKE WORTH FL Zip Code 33460	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  JOHN T PAKMAN DATE 4/29/03 (MORE Registered Agents a separate statement required when registering)			
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO REMSON, MARK 3555 S OCEAN BLVD, #417 PALM BEACH, FL 33480	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. 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 407, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowerment.			
SIGNATURE:  MARK REMSON		4-28-03 5612520495	

CH2E034 (10/02)