FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2002 8:00 am Secretary of State

COMMONWEALTH HOLDINGS INTERNATIONAL LTD INC.					Secretary of State 05-14-2002 90198 001 ***300.00	
•	DO NOT WRITE	IN THIS S	PACE			
2. Principal Place of Business 1702 RINGLING BLVD 3. Mailing Add 1702 RI			Address RINGLING BLVD			
	ot. #, etc.	Suite, Apt. #, etc.				
Charle					DO NOT WRITE IN THIS SPACE	
SARASOTA, FLORIDA		City & State SARASOTA, FLORIDA		4	. 1 El Number 65-080095 II	. Applied Lor
^{∠ip} 34	236 Country	^{∠ip} 34236	Country		Certificate of Status Desired	Not Applicable \$8.75 Additional
	· · · · · · · · · · · · · · · · · · ·			7.	Name and Address of Current Registe	Fee Required
DO NOT WRITE				Name JOSEPH HAMILTON		
		Street	Address (P.O	C2º RINGLING No BICOB Table)		
]	IN THIS SP	ACE			THE DEED	
			City			Zin Couto
8. The above	e named entity submits this statement for	the purpose of changing its	registered office	SARASO	TA P	L 34236
SIGNATURE	infaired and passes time of registered agent a	JOSEE	PH HAMILT	ON P/	D 4/2	29/2002
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	ay 1 Fee is \$15 1, Fee is \$550.0 URR is \$61.25	1 Fee is \$150.00 Fee is \$550.00 In Election Campaign Financing St.00 May Be In it is \$61.25 In Department of State		\$5.00 May Be	
11.	OFFICERS AND E	Make Check Payabl	e to Departme	nt of State		Added to Fees
TITLE NAME	PD - JOSEPH HAMIL	TON	TITLE	T		
STREET ADDRESS	1702 RINLING		NAME			Š
CITY-ST-ZIP	SARASOTA, FL	ORIDA 34236	STREET ADDRESS CITY-ST-ZIP		•	
DILE NAME	VP - DAVID KELLY		TITLE			
STREET ADDRESS	1702 RINGLING BLVD		NAME >			اَقَ
CITY-ST-ZIP	SAKASOTA, FLO	CIDA 34236	STREET ADDRESS CITY-ST-ZIP]
TITLE NAME		*	TITLE			
STREET ADDRESS			NAME			
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		DO NOT WR	ITE
TITLE NAME			TITLE			
STREET ADDRESS			NAME	ļ	IN THIS SPA	CE
CITY-ST-ZIP	: 		STREET ADORESS CITY-ST-ZIP			ļ
TITLE	-		TrTLE			
NAME STREET ADDRESS			NAME			
CITY-ST-ZIP			STREET ADORESS CITY-ST-ZIP			
TITLE			TITLE	<u> </u>		
NAME STREET ADDRESS			NAME	!		
CITY-ST-ZIP			STREET ADDRESS			
13. I hereby cz	artifus that the following		CITY-ST-ZIP			1

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 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 on an

SIGNATURE

JOSEPH HAMILTON P/D