2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 08:00 AM P98000002287 DOCUMENT # 1. Entity Name **Secretary of State** INET COMPUTER SERVICES, INC. Principal Place of Business Mailing Address 9031 S.W. 32ND STREET 9031 S.W. 32ND STREET MIAMI FL MIAMI FL33165 33165 2. Principal Place of Business 3. Mailing Address 1520 PONCE DE LEON BLVD 1520 PONCE DE LEON BLVD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For CORAL GABLES FL CORAL GABLES 65-0805279 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33143 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUIZ EDDY VJR. 9031 S.W. 32ND STREET Street Address (P.O. Box Number is Not Acceptable) MIAMI FL33165 Zip Code 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. 04/30/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition JACKSON MARVEL. MAME NAME 14308 SW 57 LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33183 CITY-ST-ZIP D ☐ Delete TITLE ☐ Change NAME RUIZ EDDY V.IR. NAME STREET ADDRESS 9031 S.W. 32ND STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33165 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition MANNING NAME STREET ADDRESS 9031 S.W. 32ND STREET STREET ADDRESS CITY-ST-ZIP MIAMI 33165 CITY-ST-ZIP ☐ Delete Сhапде TITLE Addition RUIZ NAME STREET ADDRESS 9031 S.W. 32ND STREET STREET ADDRESS CITY-ST-ZIP 33165 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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. Eddy V Ruiz Jr SIGNATURE: _ 04/30/2001

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)