2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 10, 2001 8:00 am Secretary of State 01-10-2001 90078 020 ***150.00 DOCUMENT # P98000033598 EXODUS ENTERPRISES, CORP. Principal Place of Business Mailing Address 2200 NW 32ND STREET 2200 NW 32ND STREET POMPANO BEACH FL 33069 DANATARI POMPANO BEACH FL 33069 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FFI Number City & State City & State 65-0823873 Not Applicable Country \$8.75 Additional ~ ~~ Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VERDOLIN, CAROLINA F Street Address (P.O. Box Number is Not Acceptable) 2200 NW 32ND STREET POMPANO BEACH FL 33069 City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) ☐ Addition ☐ Change TITLE **PVST** ☐ Delete NAME VERDOLIN, CAROLINA F NAME STREET ADDRESS STREET ADDRESS 1419 AVON LANE #215 CITY-ST-ZIP CITY-ST-ZIP **NORTH LAUDERDALE FL 33068** ☐ Addition Change TITLE ☐ Delete TITLE VERDOLIN, CAROLINA F NAME STREET ADDRESS 1419 AVON LANE #215 STREET ADDRESS CITY-ST-ZIP CITY-ST_ZIP... NORTH LAUDERDALE FL 33068 ☐ Addition Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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.

CAROLINA F. WERDOLIN (954) 472

CITY-ST-ZIP