2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

FILED DOCUMENT # **P98000072466** Apr 21, 2000 8:00 am Secretary of State WEB-DESIGNS.NET, INC. 04-21-2000 90124 016 ***150.00 Principal Place of Business Mailing Address 211 COUNTRYSIDE KEY 211 COUNTRYSIDE KEY OLDSMAR FL 34677-2446 OLDSMAR FL 34677 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3528383 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NEFF, CRAIG A Street Address (P.O.-Box-Number is Not-Acceptable) 211 COUNTRYSIDE KEY OLDSMAR FL 34677 Zip Code FĹ 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 DATE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition ☐ Delete TITLE TITLE NEFF, CRAIG A NAME NAME 211 COUNTRYSIDE KEY BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 34677 CITY-ST-ZIP ☐ Change Addition | ☐ Delete TITLE NEFF, BRETT D NAME NAME STREET ADDRESS 6309 92 PLACE #2504 STREET ADDRESS PINELLAS PARK FL 33782 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NEFF, PRISCILLA T NAME NAME STREET ADDRESS 211 COUNTRYSIDE KEY STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 34677 CITY=ST=ZIP DIRECTUR, MEDIA P AUGLEO LO. DELISLE MEDIA PELATIONS - Change ☐ Delete TITLE NAME NAME 5. RENIWE DL 5. RENIWE DL 5. ELOWOX, 3361 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 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

RAIGNA. NUTY, CEU 13APR 00