2001 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P98000082777 Feb 21, 2001 8:00 am Entity.Mame **Secretary of State** InfoRule, Inc. 02-21-2001 90197 004 ***150.00 Principal Place of Business (old) Mailing Address (old) 330 Clements Shreet 5uite 208 626047 WestPalm Beach, FL 33901 2. Principal Place of Business 1732 South Carages AND Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEL Number 6508R Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Josnine-1, Sme 30 Clematis Street 5ui le 209 westfalm Beach, FC 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, .9. This corporation is eligible to satisfy its Intangible FILE NOWILL FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PSTD Change John Runoven - PD TITLE TITLE NAME 330 Clemetis Street, # 208 NAME 1732 South Congress Ave. #113 STREET ADDRESS STREET ADDRESS WS+BlmBeach, FL 33401 CITY-ST-ZIP CITY-ST-7(P TITLE n Cononessi NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME 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 in the corporation of the receiver of the corporation of the receiver of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in Block changed, or on an attachment with an address, with all other like empower 2.01 SIGNATURE: