FILED Feb 24, 2002 8:00 am Secretary of State

Daytime Phone

2002 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

02-24-2002 90005 021 ***150.00 DOCUMENT # P98000091521 MARKET POSITIONING GROUP, INC. 824730 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 431 GARLANDA AVE 3: Mailing Address 152 NE 167 STREET Suite, Apt. #. etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE 301 City & State 4. FEI Number City & State Applied For CORAL GABLES MIAMI 65-0874177 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired П 33146 USA 33162 Fee Required USA 7. Name and Address of Current Registered Agent CLIFFORD Y PIERCE. DO NOT WRITE 34 Street Address (P.O. Box Number is Not Acceptable)
152 NE 167 STREET IN THIS SPACE SUITE 301 MIAMI. 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. January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 Amended UBR is \$61.25 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS CR2E034B (12/01 THIE NAME NAME PIGOZZO, MARCELLO STREET ADDRESS STREET ADDRESS 431 GARLENDA AVE CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES, FL. 33146 TITLE NAME NAME DE PIGOZZO, LEILA S 431 GARLENDA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP CORAL GABLES, FL. 33146 THILE TITLE PIGOZZO, MARCO 431 GARLENDA AVE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CTIY-ST-ZIP CITY-ST-ZIP CORAL GABLES. FL. TITLE TITLE IN THIS SPACE PIGOZZO, MARCELLO.M 431 GARLENDA AVE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES. FL TITLE TITLE NAME. STREET ADDRESS STREET AUDRESS CITY+ST-ZIP+ CITY-ST-ZIP TITLE TITLE NAME NAME ... STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7JP 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 on an attachment with an address, with all-other like-

Marcello Pigozzo

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO