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2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

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Mar 29, 2001 8:00 am DOCUMENT # P99000007622 **Secretary of State** INTERACTIVE ELECTRIC CO. 03-29-2001 91015 010 ***150.00 Principal Place of Business Mailing Address 1010 EXECUTIVE CENTER DR., STE. 141 1010 EXECUTIVE CENTER DR., STE. 141 ORLANDO FL 32803 ORLANDO FL 32803 CAROSTO 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 59-3556603 Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Bass, Jerry P Street Address (P.O. Box Number is Not Acceptable) 1010 EXECUTIVE CENTER DR., STE. 141 ORLANDO FL 32803 Zip Code City Fl 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!-FFE-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, 2001 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. 12. Delete ☐ Change TITLE BASS, JERRY P NAME NAME STREET ADDRESS STREET ADDRESS 1010 EXECUTIVE CENTER DR., STE. 101 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 Delete TITLE ☐ Change ☐ Addition TITLE BASS, LEAH W NAME NAME STREET ADDRESS STREET ADDRESS 1010 EXECUTIVE CENTER DR., STE. 101 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 TITLE ☐ Delete ☐ Change ☐ Addition BASS, RUTH A NAME 1010 EXECUTIVE CENTER DR., STE. 101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ORLANDO FL 32803 TITLE ☐ Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP-CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.