2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 17, 2000 8:00 am Secretary of State DOCUMENT # P99000011180 ADATA (USA), INC. 04-17-2000 90135 035 ***150.00 Principal Place of Business Mailing Address 13340G SW 91ST TERRACE 13340G SW 91ST TERRACE MIAMI FL 33186-1676 FL 33186 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Zio Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name 1 ALUFOHAI, DONNA ot Acceptable) 13340G SW 91ST TERRACE MIAMI FL 33186 GLORDING JEYE Zip Code the State of Florida. 8. The above named entity submits this statement for the pu SIGNATURE . DATE Signature, typed or printed name of registered agent and title if a 9. This corporation is eligible to satisfy its Intangible n Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Added to Fees and Contribution. (See criteria on back) ANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIREC 11. Change TITLE Teye Andrew Terrace OKORODUDU, JEYE ANTHONY NAME 13340G SW 91ST TERRACE STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP Change ■ Addition TITLE 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-7IP Change Addition ☐ Delete TITLE TITLE 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-ZIF Addition ☐ Delete TITLE TITLE 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 if

changed, or on an attachment with an

ddress, with all other like empowered

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR