Jul 01, 2003 8:00 am Secretary of State

07-01-2003 90040 012 ***150.00

Cayrena Phone #

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000013227 1. Entity Name INFORMATION TECHNOLOGY CONNECTION, INC. 90140533 Principal Place of Business. Malling Address 5340 N FEDERAL HIGHWAY 5340 N FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064 LIGHTHOUSE POINT, FL 33064 CHECK HERE IF MAKING CHANGES Applied For 65-0912164 Not Applicable 8. Certificate of Status Degree Sectional Fee Required 7. Name and Address of New Registered Agent DIBELER, EDWARD N 6340 N FEDERAL HIGHWAY SUITE 106 Street Address (P.O. Box Number is Not Acceptable) LIGHTHOUSE POINT, FL 33064 Zip Code 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. I am familiar the obligations of registered agent. (NOTE: Repaired Agent signature required when reinstitling) Fil. E NOWIII FEEFIS: #160id After May 1 2003 Fee will be: \$50.001 Check Payable to Flands Cepar (ment of State \$5.00 May Be 9. Election Campaign Financing Trust Funa Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition DIBELER, EDWARD N NAME 2244 2010 NE 31ST STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZP LIGHTHOUSE POINT, FL 33064 CRY-ST-ZIP TITLE ☐ Delete 1ftE Change Andilion NAMÉ STREET ADDRESS STREET ADDRESS C11Y-S1-24P CAY-ST-2IP TITLE Delete TALE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME --NAME: STREET ADDRESS STREET ADDRESS CITY-\$1-ZP CflY-S1-ZiP Delete Change Addition TITLE TITLE HALLS HAME STREET ADDRESS STREET ADDRESS CAY-ST-ZIP C1TY-ST-2P TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP 12. 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 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered. SIGNATURE: _

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment #

90140533

Edward Dibeler 2010 NE 31st Street Lighthouse Point, Florida 33064

To Whom It May Concern:

I failed to receive my corporate report this year due to a move that we did last year. We are now located at the address above.

Please waive the \$400 penalty as we have more than one company and the total of all penalties would be a hardship.

We pay on time every year and this is the first time we have been late. I realize we are two weeks late but I was expecting the form in the mail as a reminder to pay and only recently realized that I had not seen it this year.

Sincerely,

Edward Dibeler