2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 AM
Secretary of State

DOCUMENT# P99000036743

Entity Name: IBIDUSA.COM, INC.

Current Principal Place of Business:

37 SKYLINE DR., STE 1105
LAKE MARY, FL 32746

New Principal Place of Business:

934 N. UNIVERSITY DIRVE
202
CORAL SPRINGS, FL 33071

Current Mailing Address:

37 SKYLINE DR., STE 1105
LAKE MARY, FL 32746

New Mailing Address:

934 N. UNIVERSITY DRIVE
202
CORAL SPRINGS, FL 33071

FEI Number: 59-3576123 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOAR, LACY
37 SKYLINE DR., STE 1105
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

LOAR, LACY
934 N. UNIVERSITY DRIVE
202
CORAL SPRINGS, FL 33071 US

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: LACY LOAR 04/29/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: LOAR, LACY
Address: 37 SKYLINE DR., STE 1105
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: LOAR, LACY
Address: 934 N. UNIVERSITY DRIVE, STE 202
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LACY LOAR DPT 04/29/2002
Electronic Signature of Signing Officer or Director Date