03-20-2000 90098 038 ***150.00 DO NOT WRITE IN THIS SPACE Applied For Not Applicable \$8.75 Additional Fee Required meph \$5.00 May Be Added to Fees Change Addition

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FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # P99000053169 1. Entity Name WEBB HOLDINGS INTERNATIONAL, INC. Mailing Address Principal Place of Business 324 FAIRMONT ROAD 324 FAIRMONT ROAD WESTON FL 33326-3583 WESTON FL 33326 2. Principal Place of Business 3. Mailing Address 318 Indivan mare 2825 Windmill Ranch Rd Suite, Apt. #, etc. Suite, Apt. #, etc. PMB 442 City & State 4. FEI Number City & State FL. Weston weston C15-09255U& 33<u>33</u>1 Country 5. Certificate of Status Desired USA 42U 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name \mathcal{O} Jamos SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) windm. I Ranch 343 ALMERIA AVENUE CORAL GABLES FL 33134 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 tresident (NOTE: Registered Agent signature required when 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS <u>0 Ç</u> ☐ Delete TITLE webb, Jomes D Jr. TITLE 2825 windmill Ranch Rd WEBB, JAMES D HR. NAME NAME 324 FAIRMONT ROAD STREET ADDRESS STREET ADDRESS Weston, FL 33331 CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33320 webb, Joanne G. Change Addition VSTD TIT) F Delete TITLE 2825 Windnill Ranched WEBB, JOANNE, G NAME STREET ADDRESS STREET ADDRESS 324 FAIRMONT ROAD Weston, Fc 36331 CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33326 ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ De'ete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-7LP