FILED
Jun 16, 2002 8:00 am
Secretary of State
05-23-2002 90070 006 ***150.00

FORPROFITCORPORATION UNIFORMBUSINESSREPORT(UBR)

DOCUMENT# P99000059640 ✓

1. EntityName

Point2Get, Inc.

DO NOT WRITE IN THIS SPACE

[redacted]

92959

DONOTWRITEINTHISSPACE

2. PrincipalPlaceofBusiness: 2350 Twin Bay View	3. MailingAddress: Same
Suite,Apt.#,etc.	Suite,Apt.#,etc.
City&State: Ft. Walton Beach, FL	City&State
Zip: 32547 Country: U.S.	Zip Country

4. FEINumber 59-3585385 — [X] AppliedFor [ ] NotApplicable

5. CertificateofStatusDesired [ ] $8.75 Additional FeeRequired

DO NOT WRITE IN THIS SPACE

7. NameandAddressofCurrentRegisteredAgent

Name: H. Bart Fleet
StreetAddress(P.O.BoxNumberisNotAcceptable): 1201 Eglin Parkway
City: Shalimar FL ZipCode: 32579

8. Theabovenamedentitysubmitsthisstatementforthepurposeofchangingitsregisteredofficeorregisteredagent,orboth,intheStateofFlorida.

SIGNATURE: H. Bart Fleet, Registered Agent 11Feb02
SignatureandtypedorprintednameofregisteredagentandtitleifapplicableDATE (NOTE:Registeredagentsignaturerequiredwhenreinstating)

9. ThiscorporationiseligibletosatisfyitsIntangibleTaxfilingrequirementandelectstodoso. (Seecriterionback) [ ]

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. ElectionCampaignFinancing TrustFundContribution. [ ] $5.00 MayBe AddedtoFees

11. OFFICERSANDDIRECTORS

TITLE / NAME / STREETADDRESS / CITY-ST-ZIP	William R. Marshall, Pres. 2350 Twin Bay View Ft. Walton Beach, FL 32547	TITLE / NAME / STREETADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREETADDRESS / CITY-ST-ZIP	H. Bart Fleet Sec/Treas. 1201 Eglin Parkway Shalimar, FL 32579	TITLE / NAME / STREETADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREETADDRESS / CITY-ST-ZIP	~~Brian Pennington for Tybri Corp. 1030 Titan Court Ft. Walton Beach, FL 32547~~	TITLE / NAME / STREETADDRESS / CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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CR2E034B (12/01)

13. Iherebycertifythattheinformationsuppliedwiththisfilingdoesnotqualifyfortheexemptionstatedin Section119.07(3)(i),FloridaStatutes.Ifurthercertifythattheinformation indicatedonthisreportorsupplementalreportistrueandaccurateandthatmysignatureshallhavethesamelegaleffectasifmadeunderoath;thatIamanofficerordirector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter607, Florida Statutes; and that my name appears in Block 11oronan attachmentwith anaddress,withallotherlikeempowered.

SIGNATURE: William R. Marshall Pres. (850) 862-7509
SIGNATUREANDTYPEDORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR Date DaytimePhone#