2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING O

FILED DOCUMENT # **P99000078227** May 01, 2000 8:00 am Secretary of State FLAMINGO INTERNET VENTURES, INC. 05-01-2000 90412 044 ***150.00 Principal Place of Business Mailing Address 777 LAKEVIEW OR 777 LAKEVIEW DR MIAMI BEACH FL 33140-2631 MIAMI BEACH FL 33140 2. Principal Place of Business 3.--Mailing Address 777 ARTHUR GOOFREY RD 777 ARTHUR GODFREY RD Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 2NO FLOOR ZNO FLOOR 4. FEI Number 65 - 094 7 189 Applied For City & State City & State MIAMI BEACH Not Applicable MIAMI Country Zip \$8.75 Additional 5. Certificate of Status Desired 3140 USÁ 33140 Fee Required ひらみ 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ICCNORLDWIDE STAUBER, DANIEL Street Address (P.O. Box Number is Not Acceptable) 777 LAKEVIEW DR MIAMI BEACH FL 33140 ZNO FLOOR Zip Code 33140 MIAMI BEACH 8. The above named entity supmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 20 MRIL 2000 OLSC HEWS KI agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. MR Addition Delete TITLE TITLE OLSCHEWSKI, HERBY STAUBER, DANIEL NAME NAME 777 ARTHUR GODFREY RD STREET ADDRESS STREET ADDRESS 777 LAKEVIEW DR CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP MIAMI BEACH FL 33140 ■ Addition Change | ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE 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 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.