FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
05-28-2002 91750 009 ***150.00

DOCUMENT # P99000089218

1. Entity Name

FOURBIT GROUP, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2000 W. Commercial Blvd	2000 W Commercial Blvd
Suite, Apt. #, etc.: 119	Suite, Apt. #, etc.: 119
City & State: Ft. Lauderdale, FL	City & State: Ft Lauderdale, FL
Zip: 33309 Country: USA	Zip: 33309 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0955756 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Brian Foremny

Street Address (P.O. Box Number is Not Acceptable): 2000 W. Commercial Boulevard

Suite 119

City: Ft. Lauderdale **FL** Zip Code: 33309

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

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. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P D	TITLE	
NAME	Foremny, Brian	NAME	
STREET ADDRESS	2000 W. Commercial Blvd	STREET ADDRESS	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Ridgely, H.M	NAME	
STREET ADDRESS	2000 W. Commercial Blvd # 119	STREET ADDRESS	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Sanderson, Rick	NAME	
STREET ADDRESS	2000 W. Commercial Blvd # 119	STREET ADDRESS	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Brian Foremny, President 5/8/02 954-938-9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #