2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
04-27-2001 90250 004 ***150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000093599

1. Entity Name
ADGRANT SYSTEMS AND NETWORKING CORP.

Principal Place of Business	Mailing Address
18350 LONG LAKE DRIVE BOCA RATON FL 33496	18350 LONG LAKE DRIVE BOCA RATON FL 33496

2. Principal Place of Business		3. Mailing Address	
14860 Enclave Preserve circle		14860 Enclave Preserve circle	
Suite, Apt. #, etc. T-4		Suite, Apt. #, etc. T-4	
City & State Delray Beach FL		City & State Delray Beach, FL	
Zip 33484	Country USA	Zip 33484	Country USA

4. FEI Number 65-0955829 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FESSLER, DAVID G
18350 LONG LAKE DRIVE
BOCA RATON FL 33496

7. Name and Address of New Registered Agent

Name David G Fessler
Street Address (P.O. Box Number is Not Acceptable) 14860 Enclave preserve circle
T-4
City Delray Beach, FL Zip Code 33484

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] 4/22/01
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) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FESSLER, DAVID G 18350 LONG LAKE DRIVE BOCA RATON FL 33496	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PresidenT David G. Fessler 14860 Enclave Preserve circle T-4 Delray Beach, FL 33484	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE: [signature] 4/22/01 561 496 4404
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)