Apr-25-01 06:32P

FILED
May 15, 2001 8:00 am
Secretary of State
05-15-2001 90175 041 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000103647

AD067060

1. Entity Name

Starting Point.Com, Inc.

Principal Place of Business
2400 West Cypress Creek Rd
Suite 100
Ft Lauderdale FL 33308

Mailing Address
SAME

2. Principal Place of Business
2400 West Cypress Creek Rd
Suite, Apt. #, etc.
Suite 100
City & State
Ft. Lauderdale FL
Zip 33308
Country USA

3. Mailing Address
SAME
Suite, Apt. #, etc.
City & State
Zip
Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
650960872
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Thomas J. Taule
3435 Gulf Ocean Drive
Ft. Lauderdale, FL 33308

7. Name and Address of New Registered Agent

Name DAVID Blumberg
Street Address (P.O. Box Number is Not Acceptable)
1316 So. Dixie Hwy #117-511
City MIAMI FL Zip Code 33126

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 (David M. Blumberg) 04/23/01
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) ☐

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	Director Thomas J. Taule 3435 Gulf Ocean Drive Ft Lauderdale, FL 33308	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Barry D. Rothman 2400 West Cypress Creek Rd Ft Lauderdale, FL 33308	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (11/00)

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: Barry D. Rothman 4/23/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date