## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Mar 14, 2000 8:00 am Secretary of State DOCUMENT # P99000109516 CARIBBEAN NETWORK INVESTORS, INC. 03-14-2000 90091 049 \*\*\*150.00 Principal Place of Business Mailing Address 3260 Liniversity BLVD., Suite 210 3260 UNIVERSITY BLVD., SUITE 210 WINTER PARK FL 32792 WINTER PARK FL 32792 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State Not Applicable APPLIED FOR \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HEEKIN, JAMES F JR 215 N EOLA DRIVE ORLANDO FL 32801 Zip Code City 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 DATE Signature, typed or printed name of registered 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 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Director/President James W. Reavener Change ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. X Addition TITLE XX Delete TITLE 3260 University Blvd., #210 NAME HEEKIN, JAMES F JR NAME STREET ADDRESS Winter Park, Florida 32792 STREET ADDRESS 215 N EOLA DRIVE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 Director/Vice President/SecChange Addition ☐ Delete TITLE TITLE NAME Edward E. Haddock, Jr. NAME STREET ADDRESS 3260 University Blvd. #210 STREET ADDRESS CITY-ST-ZIP Winter Park, Florida 32792 Director/Vice President/Sec. CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME NAME Jonathan Phelps STREET ADDRESS STREET ADDRESS 3260 University Blvd., #210 CITY-ST-ZIP Winter Park, Florida 32792 Change CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

JAMES W. HEAVENER 3/10/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 3/10/00