2002 UNIFORM BUSINESS REPORT (UBR)

May 19, 2002 8:00 am Secretary of State FILED DOCUMENT # S37208 1. Entity Name 05-19-2002 90257 027 ***150.00 INTERNATIONAL BUSINESS ENTERPRISES, INCORPORATED Principal Place of Business Mailing Address 136 PARK LAKE STREET 136 PARK LAKE STREET 360924 ORLANDO FL 32803-3822 ORLANDO FL 32803-3822 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3129458 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HINDUJA, PRIYA K. Street Address (P.O. Box Number is Not Acceptable) 4601 CREEKVIEW LANE OVIEDO FL 32765-7537 City Zip Code 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HINDUJA, PRIYA K NAME 4601 CREEKVIEW LANE STREET ADDRESS STREET ADDRESS 32765 CITY-ST-ZIP OVIEDO FL CITY-ST-ZIP TITLE PD ☐ Delete ☐ Addition Change NAME HINDUJA, KUMAR J NAME STREET ADDRESS 136 PARK LAKE ST STREET ADDRESS CITY-ST-7IP ORLANDO FL 32803-3822 CITY-ST-ZIP De ete TITI F - Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITI F ☐ Addition NAME STREET ADDRESS STREET ADDRESS 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. HINDUJA - PROSID SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR