2000 UNIFORM BUSINESS REPORT (UBR)

Sep 13, 2000 8:00 am Secretary of State DOCUMENT # V51034 1. Entity Name MEDIATION DISPUTE CENTER, INC. 09-13-2000 90048 046 ***550.00 Principal Place of Business Mailing Address 22589 ESPLANADA DRIVE 22589 ESPLANADA DRIVE **BOCA RATON FL 33433 BOCA RATON FL 33433** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0346335 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BETTS, EUGENE N Street Address (P.O. Box Number is Not Acceptable) 912 NE 23 TERRACE POMPANO BEACH FL 33062 City Zip Code FL 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 \$550.00 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition □ Detete TITLE TITLE POMEROY, GEORGE B NAME NAME 22589 ESPLANADA DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF **BOCA RATON FL** ☐ Addition STD Change Delete TITLE POMEROY, DIANNE M NAME NAME 22589 ESPLANADA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition TITI F ☐ Change TITLE ☐ Delete NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

SICOVATURE/PEC/GIREKAS LAND
SIGNATURE AND PRÉD TO NAME OF SIGNING OFFICER OR DIRECTOR

Sent 8,2006 561-392365

Daytime Phone #

CR2E034 (5/00

September 8,2000

Division of Corporations

Tallahassee, Florida

Re: Mediation Dispute Center Corporation

Gentlemen:

I didnot receive the original renewal notice. We have had a constant mail problem which has been discussed with the local Post Office Dept. Our address To on "DRIVE" - there is a identical number a "CIRCLE" one block away.

The current residents of the Circle address have either sold their house or are away - hence I have been unable to check with them. This has been an again, problem and results in misdeliveries from time to time. Those a felder on complaints and on soin, conversations if you wish to See the Same.

If any consideration can be made on the late fee - it would be appreciated. I am sending the papers by express mail Thank you.

to be sure of their delivery. Goo. B. Pomerry - Prosident