FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # M83504 1. Entity Name GENERAL CONDUCTIVE TECHNOLOGIES, INC. 03-20-2000 90123 038 ***150.00 Mailing Address Principal Place of Business 2907 BAY TO BAY BLVD 2907 BAY TO BAY BLVD SUITE 200 SUITE 200 TAMPA FL 33629-8161 TAMPA FL 33629-8195 HS HS 2. Principal Place of Business 3. Mailing Address 7650 W. Courtney Campbell 7650 W. CourtneyCampbell DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Causeway Suite, Apt. #, etc. Causeway 1120 1120Applied For 4. FEI Number City & State City & State 59-2894856 Tampa, Florida Tampa, Florida Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 33607 USA 33607 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KRUSEN JR., W. ANDREW Street Address (P.O. Box Number is Not Acceptable) 7650 W. Courtney Campbell Cswy. #1120 2907 BAY TO BAY RD SUITE 200 TAMPA FL 33629 Zip Code 33607 Tampa, Florida 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 it applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MÄY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change PΠ TITLE PD ☐ Addition TITLE Delete KRUSEN, W. ANDREW JR NAME Krusen, W. Andrew Jr. NAME #1120 STREET ADDRESS 2907 BAY TO BAY BLVD SUITE 200 STREET ADDRESS 7650 Courtney Campbell Cswy. CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33629** Tampa, FL 33607 X Change ☐ Addition TITLE ☐ Delete TITLE SAUER, JOEL P. MAME Sauer, Joel P. 1300 MAIN ST., #1840 STREET ADDRESS STREET ADDRESS 1301 Travis St. CITY-ST-7IP CITY-ST-ZIP HOUSTON TX Houston, TX 77002 X Change ☐ Addition ☐ Delete TITLE TITLE JONES, DOUGAS N NAME NAME Jones, Douglas N. STREET ADDRESS STREET ADDRESS 2907 BAY TO BAY BLVD SUITE #200 7650 Courtney Campbell Cswy#1120 CITY-ST-ZIP TAMPA-FL-33629 CITY-ST-ZIP Tampa, FL 33607 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

Daytime Phone #

Date

2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR