[redacted]

Amended $61.25

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 DEC 17 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000058381

1. Corporation Name
NETAGE INC

Principal Place of Business / ~~Mailing Address~~
9951, ATLANTIC BLVD
SUITE #310
JACKSONVILLE, FL-32225

3. Date Incorporated or Qualified: 07/25/95
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 9951, ATLANTIC BLVD	26 9951, ATLANTIC BLVD
22 Suite, Apt. #, etc. SUITE# 310	27 Suite, Apt. #, etc. SUITE#310
23 City & State JACKSONVILLE	28 City & State JACKSONVILLE, FL
24 Zip FL-3222 25 Country	29 Zip 32225 30 Country USA

4. FEI Number: 59-3829894 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
MR. NAGAPPAN RAMAMURTHY,
1315, SOUTH LANE AVENUE,
JACKSONVILLE, FL-32205

10. Name and Address of New Registered Agent
81 Name: GURUNATH M HALADY
82 Street Address (P.O. Box Number is Not Acceptable): 9951, ATLANTIC BLVD
83 SUITE#310
84 City: JACKSONVILLE 85 FL Zip Code: 32225

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: GURUNATH M. HALADY PRESIDENT DATE: 12/2/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	☒ DELETE	1.1 TITLE	PRESIDENT ☒ Change ☐ Addition
NAME	N. RAMAMURTHY		1.2 NAME	GURUNATH M HALADY
STREET ADDRESS	1315, SOUTH LANE AVENUE,		1.3 STREET ADDRESS	9951 ATLANTIC BLVD, SUITE#
CITY-ST-ZIP	JACKSONVILLE, FL-32205		1.4 CITY-ST-ZIP	310, JAX. FL-32225
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GURUNATH M. HALADY 12-2-97 904-724-7000
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #