FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT FII FD FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 98 MAR 24 AM 10: 56 1998 **DIVISION OF CORPORATIONS** SECILERA M OF STATE TALLAHKUSESU, TLORIDA DOCUMENT #
1. Corporation Name G62975 (9) VERTILUX, INC. Principal Place of Business Mailing Address 8953 NW 23RD STREET 8953 N.W. 23 STREET MIAMI FL 33172 MIAMI FL 33172 DO NOT WRITE IN THIS SPACE US Date Incorporated or Qualified 09/27/1983 2. Principal Place of Business 26. Mailing Address 26. WCHALDS FEI Number Applied For 21 26 59-2327244 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc # 403 \$8.75 Additional 5. Certificate of Status Desired X 2665 22 SOUTH BAY SHOLE DI. 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing FLONIDA MIAMI 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 33/33 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GARCIA, JOSE TIMOTHY CI CHANDS 8953 NW 23RD ST Street Address (P.O Box Number is Not Acceptable) 82 #703 **MIAMI FL 33172** 83 Zip Code MIAMI 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 507.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PDS DELETE TITLE Change 1 1 TITLE CHAIRMAN /DIRECTOR Addition GARCIA, JOSE NAME José GALDIA 1.2 NAME 6613 NW 84TH AVE. 8953 N.W 28LD ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL MIAH! FL 33174 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE ECRETALLY MARANAS 2.1 TITLE Change Addition MATOS, TOMAS NAME 2.2 NAME TOMAS HATOS **1229 W 79TH STREET** 8953 N.W. 235T. STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL F(33172 CITY-ST-ZIP MIAM 2. 4 CITY - ST - ZIP TITLE DELETE Change 3.1 TITLE ☐ Addition PACSIDENT NAME **BELSOL. JOSE MANUEL** 3.2 NAME Jose Amnuel belspl 6613 NW 84TH AVE STREET ADDRESS 8953 N.W. 23 FF 3.3 STREET ADDRESS WAM! # 6 38172 MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE VICE PRESIDENT 4.1 TiTi E ☐ Change Addition NAME 4. 2 NAME SHINE BACK 8753 N. W. 2385 STREET ADDRESS 4.3 STREET ADDRESS 26 33/12 CITY-ST-ZIP 4.4 CITY-ST-ZIP 3-24 9 TITLE DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 200002468688 DELETE TITLE 6.1 TITLE NAME 6.2 NAME 03/26/93--01012 STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZiP 14. 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 annual report or adoptemental annual report is true and adjurate 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 ampowered be 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.