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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000073064 (5)

FILED Apr 01 1998 8:00am Secretary of State

| PRISMTEC, INC. | | | | | | | | |
|---|-----------------------------------|---------------------------------|---|---|---------------|--------------------------------|-----------------|---|
| Principal Place of Business Mailing Address | | | | | | | | |
| PRISMTEC. INC 8551 B PALMER PARK CR SARASOTA FL 34238 US | | | | PRISMTEC. INC 6551 B PALMER PARK CR SARASOTA FL 34238 US | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified |
| | | | | | Address | | | 10/05/1994 4. FEL Number Applied For |
| _ | 2. Principal Place of Business | | | 2a. Mailing Address | | | | 4. FEt Number Applied For Not Applicable |
| 21 | Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | SR 75 Additional |
| 22 | 12 | | | 27 | | | | 5. Certificate of Status Desired Fee Required |
| 1 | City & State | | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | Zip Country | | | Ztp Country | | | | Trust Fund Contribution Added to Fees |
| 24 | Zip Country | | · ⊢ | 29 30 | | | | 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No |
| -7 | 9. Name and Address of Curre | | | | | | | 10. Name and Address of New Registered Agent |
| Г | LIPP, RANDOLPH D. | | | | | | Name | |
| | 40% WANA DR 4735 Charing Cross Co | | | | \mathtt{Cr} | 82 | Street Ac | Address (P.O. Box Number is Not Acceptable) |
| | SA | RASOTA FL 34241 | | , | | | | |
| | | | | | | 83 | | |
| | | | | | | 84 | City | FL 85 Zip Code |
| 11 | . Pursuant | to the provisions of Sec | tions 607.0502 and | d 607.1508. Florida S t | atutes, t | he above | e-named c | |
| 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 reg 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 regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | poration's board of directors. I hereby accept the appointment as registered |
| agent. Fam lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE | | | | | | | | |
| L | | Signature, typed or printed nan | , , , , , , , , , , , , , , , , , , , | | NOTE: Rec | | en etulangia In | required when reinstaling) DATE |
| 12 | | DP C | OFFICERS AND DI | RECTORS DELETE | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITI NA! | | UPP, RANDOLPH | 10 | L. DECENE | | 1.2 NAME | | Li Change Lin Routton |
| STREET ADDRESS | | 4078 ¥ANA XDR. | | | | 1.3 STREET | ADORESS | |
| CITY-ST-ZIP SARASOTA FL 3424 | | | | | | T- ZIP | | |
| TIT | | | | ☐ DELETE | <u> </u> | 2.1 T⊦TL€ | | ☐ Change ☐ Addition |
| NAME | | | | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 | | 2.3 STREET | ADDRESS | | |
| CITY-ST-ZIP | | | | | | 2. 4 CITY-ST-ZIP | | |
| TITLE | | | DELETE | | | 3.1 TITLE | | Change Addition |
| NAME | | | | | | 3.2 NAME 3.3 STREET ADDRESS | | |
| STREET ADDRESS | | | | | | | | |
| TITI | Y-ST-ZIP | | | ☐ DELETE | | 3.4. CITY - S 4.1 TITLE | 01-ZIP | Change Addition |
| NAP | | | | | | 4, 2 NAME | | |
| STREET ADDRESS | | | | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | | | | 4.4 CITY-ST-ZIP | | |
| TiTi | LE | | | DELETE | | 5.1 TITLE | | ☐ Change ☐ Addition |
| NA | ME | | | | | 5.2 NAME | | |
| STP | EET ADDRESS | | | | | 5.3 STREET | ADORESS | |
| CITY-ST-ZIP | | | | | | 5.4 CITY-S | T-ZIP | Name I Address |
| TITE | | | | ☐ DELETE | | 6.1 TITLE | | ☐ Change ☐ Addition |
| NA | | | | | | 6.2 NAME | •0000000 | |
| l | KEET ADORESS | | | | | 6.3 STREET | | |
| | Y-ST-ZIP | artify that the information | on ounnhad with th | io filina doso not avali | fu for the | 6.4 CITY-S1 | | d in Section 119 07/3/(i) Florida Statutes, I further certify that the information |

indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Further certify that the informatic 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 or an attachment with an address.

(941) 927-3925