2002 UNIFORM BUSINESS REPORT (UBR)

May 29, 2002 8:00 am Secretary of State DOCUMENT # F98000006677 05-29-2002 90739 013 ***150.00 1. Entity Name SOLBOURNE COMPUTER, INC. Mailing Address Principal Place of Business 1790 38TH STREET. STE. 300 1790 38TH STREET, STE. 300 BOULDER CO 80301 BOULDER CO 80301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 94-3020446 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zio Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \square , 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (9/01) TITLE Change ☐ Delete me NAME NAME POUNDS, WALTER CR2E034 STREET ADDRESS STREET ADDRESS 1790 38TH STREET, STE, 300 CITY-ST-ZIP CITY-ST-ZIP **BOULDER CO 80301** ☐ Addition TITLE TITLE ☐ Delete NAME NAME SHEFFIELD, MARY STREET ADDRESS STREET ADDRESS 1790 38TH STREET, STE. 300 CITY-ST-ZIP City-St-7IP **BOULDER CO 80301** Change ■ Addition ☐ Delete TITLE TITLE HARAF NAME FLETT, MELISSA STREET ADDRESS STREET ADDRESS 1790 38TH STREET, STE. 300 CITY-ST-ZIP CITY-ST-7/P BOULDER CO 80301 Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS 5'''' (É.H. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE . Delete .: NAME NAME 330 ... STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST:ZIP

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 eath; 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.

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Daytime Phone #

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