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

Mar 31 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name (9)698570 SPARKNIGHT (U.S.), INC. Principal Place of Business Mailing Address 5840-C SOUTH SEMORAN BLVD C/O 101 HOWARD ST. ORLANDO FL 32822 STE 450 SAN FRANCISCO FL 94105 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/12/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 94-2802065 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name POPE, NICHOLAS A % LOWNDES, DROSDICK, DOSTER, KANTOR & REED Street Address (P.O. Box Number is Not Acceptable) 82 215 NO EOLA DR ORLANDO FL 32802 83 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE 1 1 TITLE LIEW, CHIEN E 1.2 NAME CR2E034 NAME 5840 C, SOUTH SEMORAN BLVD STREET ADDRESS 1.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE KAY, RANDALL E NAME 2.2 NAME 101 HOWARD ST. STE. 450 STREET ADDRESS 2.3 STREET ADDRESS SAN FRANCISCO CA CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE TATLE 31 TITLE Addition BADER, J. L NAME 3.2 NAME 101 HOWARD ST. STE. 450 STREET ADDRESS 3.3 STREET ADDRESS SAN FRANCISCO CA CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition 4.1 TITLE KAY, RANDALL E NAME 4. 2 NAME 101 HOWARD STREET, SUITE 450 STREET ADDRESS 4.3 STREET ADDRESS SAN FRANCISCO CA CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5 1 TITLE TAWASHA, CAROLYN NAME 52 NAME 101 HOWARD ST. STE. 450 STREET ADDRESS 5.3 STREET ADDRESS SAN FRANCISCO CA CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE Change ☐ Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

14. Thereby 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 repolyer 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 appear with an address

CITY-ST-ZIP

SIGNATURE:

FILED

(415)543-1188

3/23/98