2004

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

0678178 FP

DOCUMENT # F00000005944

1. Entity Name
XYTRANS, INC.

FILED
04 MAY -3 PM 6:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
5922 CARRIER DRIVE SUITE 201 ORLANDO FL 32819	5922 CARRIER DRIVE SUITE 201 ORLANDO FL 32819

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
5422 Carrier Drive	5422 Carrier Drive
Suite, Apt. #, etc. Suite 201	Suite, Apt. #, etc. Suite 201
City & State Orlando, FL	City & State Orlando, FL
Zip 32819 Country USA	Zip 32819 Country USA

4. FEI Number 59-3675591 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FOX, RICHARD Q 12565 RESEARCH PARKWAY, SUITE 300 ORLANDO FL 32826	Name: William A Grimm Street Address (P.O. Box Number is Not Acceptable): 301 E. Pine Street Suite 1400 City: Orlando FL Zip Code: 32801

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: William A. Grimm 600036277046 05/13/04-01176-034 **150.00 3/16/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
~~After May 1, 2003 Fee will be $550.00~~
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CHMN MILLER, STEVEN 5922 CARRIER DRIVE SUITE 201 ORLANDO FL 32819	☒ Delete	CEO Strandberg, Robert 5422 Carrier Dr. Suite 201 Orlando, FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO STRANDBERG, ROBERT 5922 CARRIER DRIVE SUITE 201 ORLANDO FL 32819	☐ Delete	Senior Vice President/CTO Ammar, Dan 5422 Carrier Dr. Suite 201 Orlando, FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP AMMAR, DAN 5922 CARRIER DRIVE SUITE 201 ORLANDO FL 32819	☐ Delete	VP Business Development WeatherWax, Edward 5422 Carrier Dr. Suite 201 Orlando, FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WEATHERWAX, EDWARD 5922 CARRIER DRIVE SUITE 201 ORLANDO FL 32819	☐ Delete	VP sale's Young, James 5422 Carrier Dr. Suite 201 Orlando, FL 32819	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LARSON, GLENN 5922 CARRIER DRIVE SUITE 201 ORLANDO FL 32819	☒ Delete	~~VP Engineering~~ ~~Wallace, Dawson~~ ~~5422 Carrier Dr. Suite 201~~ ~~Orlando, FL 32819~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	COO Jack Hillson 5422 Carrier Dr., Suite 201 Orlando, FL 32819	☐ Change ☒ Addition

CR2E034 (10/02)

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3/16/04 407-345-8008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #