2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

Principal Place of Business

2. Principal Place of Business

7800 SOUTHLAND BLVD

ORLANDO FL 32809

Suite, Apt. #, etc.

F98000006190

Mailing Address

STE 250

7800 SOUTHLAND BLVD

ORLANDO FL 32809

3. Mailing Address

Suite, Apt. #, etc.

1. Entity Name

STE 250

PARALOGIC HOLDING CORPORATION



May 01, 2003 8:00 am § Secretary of State **FILED**

05-01-2003 90370 004 ***150.00

|--|

CHECK HERE IF MAKING CHANGES

City & State	e	City & State		4. FEI Number 04-3438383 Applied For Not Applicable		
Zip ·	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
IOHANSE	N ALANT		Name	GIL WILSON		
JOHANSEN, ALAN T TERANEX, INC			Street	Street Address (P.O. Box Number is Not Acceptable)		
7800 SOUTHLAND BLVD SUITE 250				7800 SOUTHLAND BLVD, SUITE 250		
ORLANDO FL 32809			City	ORLANDO FL Zip Coch 2009		
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. WILSON CONTROLLER HIS Way. WILL 17 2003						
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 B Added to Fees						
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	Delete	TITLE	PRESIDENT / CEO = P		
NAME	BARON, MICHAEL		NAME	ROPERT DEFEN		
STREET ADDRESS	7800 SOUTHLAND BLVD, SUITE	250	STREET ADDRESS	7200 SOUTHLAND BLVD, SUITE 250		
CITY-ST-ZIP	ORLANDO FL 32809		CITY-ST-ZIP	ORLANDO FL 32909		
TITLE	Т	Delete	TITLE	☐ Change ☐ Addition		
NAME	HEIMBOUCH, MARK	A=A	NAME	DAVID KAHANI		
STREET ADDRESS	7800 SOUTHLAND BLVD, SUITE	250	STREET ADORESS	The state of the s		
CITY-ST-ZIP	ORLANDO FL 32809		CITY-ST-ZIP	ORLANDO FL 32809		
TITLE	S	Delete	TITLE	Change Addition		
NAME STREET ADDRESS	Johnson, Alan 7800 Southland Blvd, Suite	050	NAME STREET ADDRESS	JANET LEISING 1800 SOUTHLAND BLVD, SUITE 250		
CITY-ST-ZIP	ORLANDO FL 32809	. 230	CITY-ST-ZIP	ORLANDO FL 32009		
TITLE	OTIENTOO TE OZOGO	☐ Delete	TITLE	CONTROLER Change Maddition		
NAME		□ Delete	NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP	DELANDO EL 32809		
TITLĖ		☐ Delete	TITLE	☐ Change ☐ Addition		
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition		
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP			
12. I hereby of indicated	certify that the information supplied wit	h this filing does not qualify f	or the exemption signature shall	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information have the same legal effect as if made under path; 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: