FILED 2001 UNIFORM BUSINESS REPORT (UBR) Feb 05, 2001 8:00 am Secretary of State **DOCUMENT # F99000005819** 1. Entity Name ZAPME! CORPORATION 02-05-2001 90119 049 ***150.00 Principal Place of Business Mailing Address C/O JENNIFER WILLIAMS C/O JENNIFER WILLIAMS 3000 EXECUTIVE PARKWAY, SUITE 150 3000 EXECUTIVE PARKWAY, SUITE 150 00017701 SAN RAMON CA 94583 SAN RAMON CA 94583 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 91-1836242 Not Applicable Country \$8.75 Additional Zip Country Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FL 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 DATE (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 10. Election Campaign Financing \$5.00 May Be Atter MAY 1, 2001 Fee will be \$550.00 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. Nortensen, Lance Delete TITLE. INATOME, RICK NAME 3000 EXECUTIVE PARKWAY, Suite 150 NAME 3000 EXECUTIVE PARKWAY, SUITE 150 STREET ADDRESS STREET ADDRESS San Ramon, CA 9458 CITY-ST-7IP CITY-ST-ZIP SAN RAMON CA 94583 ☐ Change ☐ Addition DCEO TITLE Delete TITLE MORTENSEN, LANCE NAME NAME STREET ADDRESS 3000 EXECUTIVE PARKWAY, SUITE 150 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN RAMON CA 94583 Delete Change TITLE TITLE Bradford, Kirby Barkway, Ste # 150 BURWELL, W. SCOTT. NAME NAME. STREET ADDRESS 3100 LUNBROOK DRIVE STREET ADDRESS SAN RAMON, CA 94563 CITY-ST-ZIP **PLANO TX 75075** CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE BOWER, BRUCE D NAME NAME 3000 EXECUTIVE PARKWAY. SUITE 150 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN RAMON CA 94583 **VCFO** ☐ Change ☐ Addition TITLE ☐ Delete TITLE EDWARDS, ROBERT NAME NAME 1744 CONN VALLEY RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ST. HELENA CA 94574 ☐ Change ☐ Addition Delete TITLE TITLE KINGSBOROUGH, DON NAME NAME STREET ADDRESS 3000 EXECUTIVE PARKWAY, SUITE 150 STREET ADDRESS

13. 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 11 or Block 12 if in an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

SAN RAMON CA 94583

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/01