FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G85073 (6)

1. Corporation Name
STREAMLINE TECHNOLOGIES, INC.

Principal Place of Business
7125 UNIVERSITY BLVD
WINTER PARK FL 32792
US

Mailing Address
7125 UNIVERSITY BLVD
WINTER PARK FL 32792
US

3. Date Incorporated or Qualified: 02/17/1984
3a. Date of Last Report: 04/21/1995
4. FEI Number: 59-2389472 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired XX — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. XX Yes ☐ No

2. Principal Place of Business
21 6961 University Blvd.
Suite, Apt. #, etc.
22
City & State
23 Winter Park, FL
Zip
24 32792
Country
25 USA

2a. Mailing Address
26 6961 University Blvd.
Suite, Apt. #, etc.
27
City & State
28 Winter Park, FL
Zip
29 32792
Country
30 USA

9. Name and Address of Current Registered Agent
ICARDI, JEFFREY A.
990 LEWIS DR.
WINTER PARK FL 32789

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL
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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PVDS	☐ DELETE
NAME	SINGHOFEN, PETER J.	
STREET ADDRESS	7125 UNIVERSITY BLVD	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	T	☐ DELETE
NAME	SINGHOFEN, ANNAMARIE F	
STREET ADDRESS	7125 UNIVERSITY BLVD	
CITY-ST-ZIP	WINTER PARK FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		X Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	6961 University Blvd.	
1.4 CITY-ST-ZIP	Winter Park, FL 32792	
2.1 TITLE		X Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	6961 University Blvd.	
2.4 CITY-ST-ZIP	Winter Park, FL 32792	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 receiver 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 attachment with an address.

SIGNATURE: Annamarie Singhofen — 3-28-96 — 407-679-1696

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

CR2E034 (12/95)