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

CORPORATION ANNUAL REPORT 1998 DOCUMENT # K67944 RFM SYSTEMS, INC. Principal Place of Business 4497 SIR PAGE LANE TITUSVILLE FL 32796 2. Principal Place of Business 21 Suite, Apl. #, etc. 22 City & State 23 Zip 24 25

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(4)

FILED May 12 1998 8:00am Secretary of State

Mading Address 4497 SIR PAGE LANE TITUSVILLE FL 32786 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/23/1989 2a. Mailing Address Applied For 26 59-2931903 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 囟 27 Fee Required City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country Zip Country This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MCCARTHY, RICHARD F. 4497 SIR PAGE LANE 82 Street Address (P.O. Box Number is Not Acceptable) TITUSVILLE FL 32780 83 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change 1.1 TITLE NAME MCCARTHY, RICHARD F. 1.2 NAME 4497 SIR PAGE LANE STREET ADDRESS 1.3 STREET ADDRESS TITUSVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition MCCARTHY, RICHARD F. NAME 2.2 NAME 4497 SIR PAGE LABE STREET ADDRESS 2.3 STREET ADDRESS TITUSVILLE FL CITY-ST-ZIP 2. 4 CiTY - ST - ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE ☐ DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-Z#P 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - 7IP

14. 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 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

Sand F. Mc Cartho