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

Mar 12 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # L11915 (0)LASER SOURCE, INC. Principal Place of Business Mailing Address 105 S.E. 7TH STREET 105 S.E. 7TH STREET DO NOT WRITE IN THIS SPACE DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 3. Date Incorporated or Qualified 08/24/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 26 65-0140310 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Źφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MEISELES, LEONARDO 4740 S. OCEAN BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **APT 910** 83 HIGHLAND BEACH FL 33487 84 City 85 Zip Code 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 proted name of rightered agent and title if applicable (NO1): Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change 11 TITLE TITLE MEISELES, LEONARDO NAME 12 NAME 4740 S. OCEAN BLVD. #910 STREET ADDRESS 1.3 STREET ADDRESS HIGHLAND BEACH FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELE TE ☐ Change Addition TITLE 2.1 TITLE MEISELES, SYLVIA 2.2 NAME NAME STREET ADDRESS 4740 S. OCEAN BLVD. #910 2.3 STREET ADDRESS HIGHLAND BEACH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3 2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Спапре Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby certify that the information supplied with this hing 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 supplied certify that the information indicated on this annual report or supplied certify that the information indicated on this annual report of supplied certify that the information indicated on this annual report of supplied certify that the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on this annual report of supplied with the information indicated on the supplied with the information indicated with the information indicated with the information indicated with the informatio

5.4 CITY - ST-ZIP

6.3 STREET ADDRESS 64 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIE

STREET ADDRESS

TITLE

DELETE

resident March 5,1898 (954) 570-9137

Change

Addition

FILED