Mailing Address

C/O RICHARD WONG

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M21516

Principal Place of Business C/O RICHARD WONG

INTEL MACHINERY SERVICES, INC.

4611 SOUTH UNIVERSITY DR. SUITE 111 4611 SOUTH UNIVERSITY DR. SUITE 111 DO NOT WRITE IN THIS SPACE DAVIE FL 33328 DAVIE FL 33328 3. Date Incorporated or Qualifed 10/04/1985 Applied For FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-2584026 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Country Zip Zip □No Personal Property Tax. 30 25 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 WONG, RICHARD Street Address (P.O. Box Number is Not Acceptable) 82 14321 SW 47TH COURT FORT LAUDERDALE FL 33330 83 85 Zip Code 84 City 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 an Amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Statute: treed or printed name of registered agent and title it perfective. SIGNATURE 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS Change ☐ Addition ☐ DELETE TITLE 1.2 NAME WONG, RICHARD NAME 1.3 STREET ADDRESS 14321 SW 47TH COURT STREET ADDRESS FORT LAUDERDALE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE ٧S TITLE 2.2 NAME WONG, RICHARD NAME 2.3 STREET ADDRESS 14321 SW 47TH COURT STREET ADDRESS 2. 4 CITY-ST-ZIP FORT LAUDERDALE FL CITY-ST-ZIP ☐ Addition Change DELETE 3.1 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90112 049 ***150.00



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 CITY-ST-ZIP nereby certify that the information supplied with this litting does not qualify for the exemption stated in Section 1.19.07(3)(f), Florida Statutes. I further certify that the international 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 of the corporation of the corporation of the receiver of trustee empowered.

SIGNATURE

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