2002 UNIFORM BUSINESS REPORT (UBR)

Apr 18, 2002 8:00 am Secretary of State P00000059937 DOCUMENT # 1. Entity Name 04-18-2002 90469 040 ***150.00 LOCAST CORPORATION Principal Place of Business Mailing Address 330 S. PINEAPPLE ST. 330 S. PINEAPPLE ST. Killipoonn SUITE 102 SUITE 102 SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-1046772 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 'Name' BIRNBACH, JEFRREY M Street Address (P.O. Box Number is Not Acceptable) 523 SOUTH PALM AVENUE SUITE ONE SARASOTA FL 34235 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 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 12. 11. Change ☐ Addition Delete TITLE TITLE BIRNBACH, JEFFREY NAME NAME STREET ADDRESS STREET ADDRESS 330 S. PINEAPPLE ST. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME JORGENSEN, SERGE NAME 330 S. PINEAPPLE ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME SILVERMAN, FRANK STREET ADDRESS STREET ADDRESS 330 S. PINEAPPLE ST. CITY-ST-ZIP CITY-ST-ZIP sarasota FL 34236 ☐ Change ☐ Addition ☐ Delete TITLE VP. C00 TITLE NAME MARGETTA, CHARLES NAME STREET ADDRESS STREET ADDRESS 330 S. PINEAPPLE ST. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

FILED