CR2E034 (10/02)

FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

May 01, 2003 8:00 am Secretary of State P00000063151 **DOCUMENT #** 05-01-2003 90395 047 ***150.00 1. Entity Name BALSYS TECHNOLOGY GROUP, INC. Principal Place of Business Mailing Address 7141 TALLW TREE LANE 7141 TALLW TREE LANE ORLANDO FL 32835 ORLANDO FL 32835 2. Principal Place of Business 3. Mailing Addr ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For 59-3654184 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LAMORAY, LARRY Street Address (P.O. Box Number is Not Acceptable 7706 SAndmorn 6-1) 7141 TALLOW TREE LANE ORLANDO FL 32835 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. I am familiar the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FRE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete ☐ Addition **BOHANNON, THOMAS E** NAME NAME STREET ADORESS 7141 TALLW TREE LANE STREET ADDRESS ORLANDO FL 32835 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition 7706 BANDMOON HILL CINCE LAMORAY, LARRY NAME NAME STREET ADDRESS 7141 TALLW TREE LANE STREET ADDRESS ORLANDO FL 32835 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Delete TITI F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. 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 faccurate 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 10 or Block 11 if

SIGNATURE:

changed, or on an attachment with

SIGNATURE AND TWEE OR POINTED NAME OF