FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 09, 2002 8:00 am Secrétary of State P00000089227 **DOCUMENT #** 1. Entity Name 07-09-2002 90027 038 ***150.00 MEDICAL DATA TECHNOLOGIES, INC. Mailing Address Principal Place of Business 210 S. PARSONS AVE., #9 210 S. PARSONS AVE., #9 BRANDON FL 33511 BRANDON FL 33511 2. Principal Place of Business 3. Mailing Address Same as #2 Aug #10 10 5 Parsons DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-105 1946 Not Applicable Country \$8,75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SIX. DAVID E Street Address (P.O. Box Number is Not Acceptable) 210 S. PARSONS AVE., #9 BRANDON FL 33511 Zip Code City 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 with, and accept the obligations of registered ag (NOTE: Registered Agent signature required when reinstating) registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Addition Change TITLE ☐ Delete **PTSD** TITLE NAME NORBOM, WILSON C PTSD NAME STREET ADDRESS 210 S PARSONS AVE STE 10 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRANDON FL 33511 ☐ Addition Change TITLE ☐ Delete **PTSD** TITLE NAME SIX, DAVID E PTSD NAME STREET ADDRESS 210 S PARSONS AVE STE 10 STREET ADDRESS CITY-ST-ZIP BRANDON FL 33511 CITY-ST-ZIP Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNA MANAGER OF SIGNING OFFICER OR DIRECTOR

7/1/02

813 643 7424

Daytime Phone #

CR2E034 (4/02)

Wilson Chay Norbom

210 South Parsons Avenue • Suite 10 • Tampa, Florida 33511 (813) 643-7424 • Fax: (813) 643-2966 chay.norbom@meddatatech.com

Attachment D#POODD89820 BUI27512

July 1, 2002

Uniform Business Report Division of Corporations P.O. Box 1500

RE: InfoVest, Inc. & Medical-Data Technologies,-Inc.-UBRs ---

To Whom It May Concern:

Today we received our 2002 UBR forms for late filers. Unfortunately, this is the only set of 2002 UBR forms we have received. Lacking the original notices, we had no idea that we had missed the deadline. I placed a call to the Division of Corporations and was informed that if I included a letter of explanation, I could submit the normal \$150.00 fee for the UBR submissions since we had not received any prior notice.

Please let me know if there are any problems. I can be reached at 813-643-7424.

Sincerely,

Chay Norbom

President

InfoVest, Inc.

Medical Data Technologies, Inc.