2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003
Secretary of State

DOCUMENT# P01000038198

Entity Name: VESTIBULAR TECHNOLOGIES, INC.

Current Principal Place of Business:

10240 WATERSIDE OAKS DRIVE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

10240 WATERSIDE OAKS DRIVE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 86-0900170 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENDERSON, A. BOB
10240 WATERSIDE OAKS DRIVE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V/D ( ) Delete
Name: OGGERO, ELENA
Address: 18002 RICHMOND PLACE DRIVE, # 827
City-St-Zip: TAMPA, FL 33647 US

Title: P/D ( ) Delete
Name: HENDERSON, A. BOB
Address: 10240 WATERSIDE OAKS DRIVE
City-St-Zip: TAMPA, FL 33647 US

Title: S/D ( ) Delete
Name: HENDERSON, LYNN A
Address: 10240 WATERSIDE OAKS DRIVE
City-St-Zip: TAMPA, FL 33647 US

Title: V/D ( ) Delete
Name: PAGNACCO, GUIDO
Address: 18002 RICHMOND PLACE DRIVE, # 827
City-St-Zip: TAMPA, FL 33647 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. BOB HENDERSON P/D 02/13/2003

Electronic Signature of Signing Officer or Director — Date