## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Jan 26, 2000 8:00 am Secretary of State **DOCUMENT # P16006** 1. Entity Name MOBILE TECHNOLOGY INC. 01-26-2000 90015 047 \*\*\*150.00 Principal Place of Business Mailing Address 1065 PACIFICENTER DR 1065 PACIFICENTER DR STE 200 STE 200 UUU11304 ANAHEIM CA 92806 ANAHEIM CA 92806-2131 US 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 94-2568732 Not Applicable Zip Country Country \$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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees X (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D Change ☐ Addition TITLE ☐ Delete TITLE NAME ZEHNER, R NAME STREET ADDRESS 1065 PACIFICENTER DR, 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ANAHEIM CA 92806 Addition TITLE Delete TITLE Change NAME PINO, VINCENT MAME STREET ADDRESS 1065 PACIFICENTER DR 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ANAHEIM CA 92806** TITLE Delete ORD. KENNETH NAME NAME STREET ADDRESS STREET ADDRESS 1065 PACIFICENTER DR, 200 CITY-ST-ZIP CITY-ST-ZIP ANAHEIM CA 92806 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME ALMIERI, RAYMOND M NAME STREET ADDRESS 1065 PACIFICENTER DR, 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ANAHEIM CA 92806** ☐ Delete TITLE ☐ Change ☐ Addition TITLE PHILLIPS, RUSSELL D JR. NAME NAME STREET ADDRESS STREET ADDRESS 1065 PACIFICENTER DR. 200 CITY-ST-ZIP CITY-ST-ZIP ANAHEIM CA 92806 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS See attached 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michelle Horn,

Asst. Secretary