2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P29707 Apr 12, 2000 8:00 am Secretary of State QUANTUM INDUSTRIES CALIFORNIA, INC. 04-12-2000 90010 038 ***150.00 Principal Place of Business Mailing Address 3360-A COFFEY LANE 3360-A COFFEY LANE SANTA ROSA CA 95403-1995 SANTA ROSA CA 95403 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 94-2392804 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE ☐ Delete TITLE NAME FRANKLIN, GARY L. NAME : 3360-A COFFEY LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANTA ROSA CA Change Addition ☐ Delete TITLE TITLE PIEKARA, DEANE MATTHEW NAME NAME STREET ADDRESS STREET ADDRESS 5786 SUN POINT CIRCLE CITY-ST-7IF CITY-ST-ZIP **BOYNTON BEACH FL 33437** X XAddition XX Delete TITLE SEC ☐ Change TITLE KING, DANIEL G. NAME AMERLAN, RAYMOND J. NAME STREET ADDRESS STREET ADDRESS 3360A COFFEY LANE 3360-A COFFEY LANE CITY-ST-ZIP CITY-ST-ZIP SANTA ROSA CA SANTA ROSA, CA ☐ Change ☐ Addition ☐ Delete TITLE TITLE BARONET, BARRY P. NAME NAME 10909 SABO RD SUITE 222 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **HOUSTON TX** ☐ Addition ☐ Change ☐ Delete TITLE TITLE FALLIS, WILLARD J. NAME STREET ADDRESS STREET ADDRESS 3360A COFFEY LANE CITY-ST-ZIP CITY-ST-ZIP SANTA ROSA CA Change ☐ Addition ☐ Delete TITLE TITLE MANGOSH, THEODORE N. NAME NAME STREET ADDRESS STREET ADDRESS 7225 SOWUL DRIVE CITY-ST-ZIP CITY-ST-ZIP CONCORD OH

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. 707~523~9797 DANIEL G. KING **SIGNATURE:** Daytime Phone #

OFFICER OF DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNI