2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 23, 2000 8:00 am Secretary of State **DOCUMENT # P39422** 1. Entity Name MH LIGHTNET OF FLORIDA, INC. 04-23-2000 90055 024 ***150.00 Principal Place of Business Mailing Address 1401 NORTHPOINT PARKWAY 1500 MARKET ST. 2ND FLOOR 36TH FLOOR PHILADELPHIA PA 19102-2100 WEST PALM BEACH FL 33407 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0385648 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DUNBAR, PETER M. Street Address (P.O. Box Number is Not Acceptable) 306 NORTH MONROE STREET TALLAHASSEE FL 32301 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Change Addition TITLE ☐ Delete ROBERTS, BRIAN NAME NAME STREET ADDRESS 1500 MARKET ST. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PHILADELPHIA PA 19102 Change ☐ Addition TITLE □ Delete TITLE BACKSTROM, STEPHEN C. NAME NAME STREET ADDRESS 1500 MARKET ST. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PHILADELPHIA PA 19102 ☐ Change ☐ Addition ☐ Delete TITLE SMITH, LAWRENCE NAME NAME STREET ADDRESS 1500 MARKET ST. STREET ADDRESS CITY-ST-ZIP PHILADELPHIA PA 19102 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE WANG, STANLEY NAME NAME STREET ADDRESS STREET ADDRESS 1500 MARKET ST. CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19102 TITLE ☐ Change ☐ Addition ☐ Delete TITLE ALCHIN, JOHN NAME NAME 1500 MARKET ST. STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-7IP PHILADELPHIA PA 19102 Change Addition TITLE ☐ Delete TITLE ROBERTS, RALPH NAME NAME STREET ADDRESS STREET ADDRESS 1500 MARKET ST.

13. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

PHILADELPHIA PA 19102

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00

215-981-7557

Daytime Phone #