FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

May 13 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P39598 (8)FOUNTAINHEAD TECHNOLOGIES, INC. Principal Place of Business Mailing Address SOT VALLEY STREET 501 VALLEY STREET PROVIDENCE BY 02908 PROVIDENCE NI 02908 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/07/1992 2. Principal Place of Business 4. FEI Number Applied For 3420 NW 53RD SI 3430 NW53LDS7.
Suite, Apt. #, etc. 04-2800924 Not Applicable \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 8. Election Campaign Financing FT. LAUDERDALE Added to Fees Trust Fund Contribution 23 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 C T CORPORATION SYSTEM 1200 S PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition **CPTS** ■ DELETE 1.1 TITLE TITLE James Antmann LUBRANO, FRANCIS 1.2 NAME NAME 3420 HW SBrac St 501 VALLEY STREET 1.3 STREET ADDRESS STREET ADDRESS Ft. Landervolle Fe 33309 PROVIDENCE RI-1.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Addition - Change ☐ DELETE 21 TITLE TITLE Laurie J. Misner HARDIN, WILLIAM S 1100 S.W. 1344 St. 2.2 NAME NAME 3731 IVY ROAD NE 2.3 STREET ADDRESS STREET ADDRESS BOCA RATON FL 33486 ATLANTA GA CITY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition DELETE TITLE 3.1 TITLE PALMER, JAMES E NAME 3.2 NAME **52 LLOYD AVE** STREET ADDRESS 3.3 STREET ADDRESS PROVIDENCE RE CITY-ST-ZIP 3.4. CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE **ELKINS. HOWARD F** 4.2 NAME NAME 2867 WYNGATE NW 4.3 STREET ADDRESS STREET ADDRESS ATLANTA GA CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE 5.1 THILE TITLE EDMUNDSON, DANIEL C **5.2 NAME** NAME 90 PARK AVE 5.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 5.4 CITY-ST-ZIP Change ■ Addition DELETE 61 TITLE TITLE 62 NAME NAME **63 STREET ADDRESS** STREET ADORESS 6.4 City - St - ZiP Aupplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information apply include an invalidation of the following the same legal effect as if made under oath; that I am an or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in 14. I hereby certify that the informatic indicated on this annual report of officer or director of the dorsoral Block 12 or Block 13 if c :hment with an ad**dre**ss.

FILED