FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 07, 2002 8:00 am Secretary of State DOCUMENT # P40564 1. Entity Name 05-07-2002 90223 016 ***150.00 UNIROYAL TECHNOLOGY CORPORATION Principal Place of Business Mailing Address 2 N TAMIAMI TR 2 N TAMIAMI TR STE 900 STE 900 SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0341868 Not Applicable Zip Country Zip 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 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TIT! F Change ■ Addition NAME SORAN, ROBERT L NAME STREET ADDRESS 2 N TAMIAMI TR #900 STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME Janney, Oliver J NAME STREET ADDRESS STREET ADDRESS 2`N`TAMIAMI'TR=#900 CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ZULANAS, GEORGE J JR NAME STREET ADDRESS 2 N TAMIAMI TR #900 STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP TITLE CD ☐ Delete ☐ Change ☐ Addition NAME CURD. HOWARD R NAME STREET ADDRESS 2 N. TAMIAMI TRAIL, #900 STREET ADDRESS CITY-ST-ZiP SARASOTA FL 34236 CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition BYNOE, PETER C B NAME STREET ADDRESS 333 WEST 35TH STREET STREET ADDRESS CITY-ST-ZIP CHICAGO IL CITY-ST-ZIP ☐ Delete DITE Change ☐ Addition PORTER, JOHN A NAME STREET ADDRESS 2 N TAMIAMI TR., #900 STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34236 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: 2 4/29/02

Vice President.

CFO_&

Treasurer