SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 AUG 10 PM 12:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P92000005115 (0)**

1. Corporation Name
THIRD DIMENSION, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
11224 SHADYBROOK DRIVE TAMPA FL 33625 US	11224 SHADYBROOK DRIVE TAMPA FL 33625 US

3. Date Incorporated or Qualified: 11/12/1992
3a. Date of Last Report: 08/15/1994

2. Principal Place of Business
21 501 Golf Tee Lane
22 Suite, Apt. #, etc. 117
23 City & State: Longwood FL
24 Zip: 32779
25 County: Seminole

2a. Mailing Address
26 501 Golf Tee Lane
27 Suite, Apt. #, etc. 117
28 City & State: Longwood FL
29 Zip: 32779
30 County: Seminole

4. FEI Number: 65-0370732 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PULLARD, JOSEPH
11224 SHADYBROOK DRIVE
TAMPA FL 33625

10. Name and Address of New Registered Agent

01 Name: Robert DuPont
02 Street Address (P.O. Box Number is Not Acceptable): 506 S. Willow, #3
03
04 City: Tampa FL 05 Zip Code: 33606

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: Robert DuPont - President — 8/4/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	Removed	☐ Change ☐ Addition
NAME	PHILLIP, MARK W	1.2 NAME		
STREET ADDRESS	7514 SANIBEL CIRCLE, SOUTH	1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33637	1.4 CITY-ST-ZIP	No longer a Director	
TITLE	V	2.1 TITLE	V	☒ Change ☐ Addition
NAME	PULLARD, JOSEPH M	2.2 NAME	Joseph Pullard	
STREET ADDRESS	11224 SHADYBROOK DRIVE	2.3 STREET ADDRESS	501 Golf Tee Lane, #117	
CITY-ST-ZIP	TAMPA FL 33625	2.4 CITY-ST-ZIP	Longwood FL 32779	
TITLE	P	3.1 TITLE	N.A.	☒ Change ☐ Addition
NAME	DUPONT, ROBERT	3.2 NAME	Robert DuPont	
STREET ADDRESS	3002 WEST CLEVELAND, SUITE 3-B	3.3 STREET ADDRESS	506 S. Willow #3	
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	Tampa FL 33606	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert DuPont - President — 8/4/95 — 813-3409946
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0101384 CP