

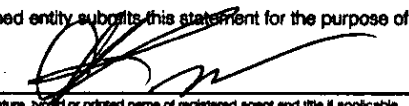
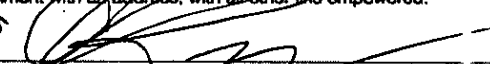
2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 91167 012 ***150.00

771189

DO NOT WRITE IN THIS SPACE

DOCUMENT # P92000012596			
1. Entity Name BIFS TECHNOLOGIES CORPORATION			
Principal Place of Business		Mailing Address	
2. Principal Place of Business 2075 Fruitville Rd.		3. Mailing Address 2075 Fruitville Rd.	
Suite, Apt. #, etc. 200		Suite, Apt. #, etc. 200	
City & State Sarasota, FL		City & State Sarasota, FL	
Zip 34236	Country US	Zip 34236	Country US
4. FEI Number 65-0382549		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KEYSER, ALPHA J. 525 SUTTON PLACE LONGBOAT KEY, FL 34228		Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City FL Zip Code	
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 4-25-01	
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 tax filing requirement and elects to do so. ☐ (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 fee will be \$550.00 Make Check Payable to Department of State	
		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO KEYSER, ALPHA J. 525 SUTTON PLACE LONGBOAT KEY, FL 34228 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HUNTER-KEYSER, VICTORIA 525 SUTTON PLACE LONGBOAT KEY, FL 34228 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANNON, THOMAS G. ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition -2075 FRUITVILLE RD, SUITE 200 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEILER, JAMES ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2075 FRUITVILLE RD, SUITE 200 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 officers empowered.			
SIGNATURE: 		DATE 4-27-01 Daytime Phone # 941-343-5300	
Signature and typed or printed name of signing officer or director			

CR2E034 (1/1/00)