2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Apr 25, 2000 8:00 am Secretary of State DOCUMENT # **P93000027827** EPIX VI. INC. 04-25-2000 90073 011 ***150.00 Mailing Address Principal Place of Business 3710 CORPOREX PARK DRIVE. SUITE 300 3710 CORPOREX PARK DRIVE. SUITE 300 TAMPA FL 33619-1160 TAMPA FL 33619 2. Principal Place of Business 3. Mailing Address A 5 pen Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Route 9 North 480 City & State 4. FEI Number Applied For City & State 59-3176621 Woodbridge Not Applicable \$8.75 Additional Zip 5. Certificate of Status Desired US Fee Required 07095 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MOORE, MICHAEL M Street Address (P.O. Box Number is Not Acceptable) 3710 CORPOREX PARK DR STE #300 **TAMPA FL 33919** Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Delete TITL F TITLE WAJNERT, THOMAS NAME NAME 3710 CORPOREX PARK DR, #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33619 CFO** Change ☐ Addition ☐ Delete TITLE TAYLOR, THOMAS S NAMÉ 3710 CORPOREX PARK DR. #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33619** ☐ Delete TITLE □ Change ☐ Addition TITLE ROSENTHAL, STEVE A NAME NAME STREET ADDRESS 3710 CORPOREX PARK DR. #300 STREET ADDRESS CITY-ST-ZIE **TAMPA FL: 33619** CITY-ST-ZIP- -Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Steve Rosenthal 4/18/00 (732)855-8585