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

Mailing Address % 200 E LAS OLAS BLVD

FT LAUDERDALE FL 33301

STE 2050

US

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

FT LAUDERDALE FL 33301

200 E. LAS OLAS BLVD

STE 2050

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 11 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Change

4/23/98 954-524-0601

Addition

3. Date Incorporated or Qualified

05/24/1993

Secretary of State DIVISION OF CORPORATIONS

P93000037627 (5) DOCUMENT # 1, Corporation Name

ASON TECHNOLOGIES, INC.

2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0418939 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution

8. This corporation owes or has paid the current year Intangible

1. The dual line 30. Yes No Note to the current year Intangible of the current year Intangible 23 28 Zip Country Country 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BRINKLEY, W. MICHAEL 200 E LAS OLAS BLVD Street Address (P.O. Box Number is Not Acceptable) STE 1800 83 FT LAUDERDALE FL 33301 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE MOLLER, ANDERS NAME 1.2 NAME α CIA SUITE 2050 200 EAST LASOLAS BLVD. 12TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 C(TY - ST- 2IP ☐ DELETE Change TITLE 2.1 1(ILE FORD, JANICE NAME 2.2 NAME 200 EAST LAS OLAS BLVD. 12TH-FLOOR ADD SUITE 2050 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL DITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Addition TITLE 4.1 TITLE Change 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition 5.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 City - ST- ZIP 14. 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 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 changes, or on an attachment with an address.

5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

DELETE