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

PROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State
02-24-1999 90092 020 ***150.00

DOCUMENT # **P93000071654**

1. Corporation Name
ISYS CORPORATION

Principal Place of Business	Mailing Address
~~1035 S SEMORAN BLVD~~	~~PO BOX 4480~~
~~1007~~	~~SUITE 330~~
~~WINTER PARK FL 32792~~	~~WINTER PARK FL 32793-4480~~
~~US~~	~~US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 10/12/1993

2. Principal Place of Business
21 2773 Enterprise Road East
Suite, Apt. #, etc.
22 55
City & State
23 Clearwater FL
Zip 24 33759 Country 25 USA

2a. Mailing Address
26 PO Box 15308
Suite, Apt. #, etc.
27
City & State
28 Clearwater FL
Zip 29 33766-5308 Country 30 USA

4. FEI Number 59-3205633 — Applied For / Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BOGGESS, DARCY J
~~1035 S SEMORAN LVD~~
~~1007~~
~~WINTER PARK FL 32792~~

10. Name and Address of New Registered Agent

81 Name: Darcy J Boggess
82 Street Address (P.O. Box Number is Not Acceptable): 2773 Enterprise Road East, #55
83
84 City: Clearwater FL 85 Zip Code: 33766

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: Darcy Boggess — Darcy Boggess — 1/14/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PSTD	☒ DELETE
NAME	BOGGESS, DARCY J	
STREET ADDRESS	1035 S SEMORAN LVD, STE 1007	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSTD	☒ Change ☐ Addition
1.2 NAME	BOGGESS, DARCY J	
1.3 STREET ADDRESS	2773 ENTERPRISE ROAD EAST, #55	
1.4 CITY-ST-ZIP	CLEARWATER FL 33759	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (11/98)

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Darcy Boggess — Darcy Boggess — 1/14/99 — 727-799-8194
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #