FILED Jun 08, 1999 8:00 am **PROFIT** FLORIDA DEPARTMENT OF STATE **Secretary of State** CORPORATION Katherine Harris ANNUAL REPORT Secretary of Stays 06-08-1999 90004 050 ***550.00 DIVISION OF CORPORATIONS 1999 DOCUMENT # P94000077735 INTERNATIONAL MICROTECH INC. Mailing Address Principal Place of Business 7000 NW 46TH ST 7000 NW 46TH ST. MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/20/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 65-0602869 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Inf Zip Country Zip 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BLANCO. RYAN, MICHAEL K Street Address (P.O. Box Number is Not 82 7000 NW 46TH ST. 000 NW MIAMI FL 33166 83 84 City MIAMI F٤ 11. Pursuant to the provisions of Sections 607.0502 and 607.1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, lo-the State of Florida, Suon change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with approach the obligations of Section 607.6505. Florida Statutes. DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition DELETE 1.1 TITLE TITLE CR2E034 NAME 12 NAME AVERILL JOSEPH-P--25 WEST FLAGLETI ST. STE-710 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33130** 1.4 CITY-5T-ZIP CITY-ST-ZIP DELETE Addition Change 2.1 TITLE TITLE 37 2.2 NAME RYAN, MICHAEL K 2.3 STREET ADDRESS 7000 NW 48TH ST. STREET ADDRESS 2.4 CITY-ST-ZIP MIAMI FL 99166 CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE PRANCE, FRANK J 7000 NW 46 5T. 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 33166 MIAMY FL 3.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 4.1 TITLE TITLE BIANCO, SUZANDE 4.2 NAME NAME 7,000 NW 46 5T. 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 6.1 TITLE Change DELETE TITLE 62 NAME NAME **6.3 STREET ADDRESS**

14. I hereby certify that the information supplied with this filling 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 chapter 13 if chapter 14 in the late of the corporation of the corporation

84 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

HOME OF SIGNOWS OFFICER OR DIRECTOR