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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

Mar 10 1998 8:00am

Secretary of State

DOCUMENT # P9400093839 (6)

PAYROLL TRANSFERS MANAGEMENT, INC.

NAME		LL TRANSI ERS MANAGEN	EMIT MO			1 18 1 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	
3710 CORPOREX PARK DR SUITE \$00 SUIT	Principal Place	e of Business	Mailing Address			{	<b>ii, iiiii,</b> iiiii: iiiiij, iiiii, iiii iiii	
SUITE 500 TAMPA FL 33619  2. Principal Place of Businoss 2. Amaling Address 2. Principal Place of Businoss 2. Amaling Address 2. Solid, Apt. #, etc. 3. Detail incorporation composition	,		Ū	DD.				
2. Principal Place of Business   2a. Mailing Address   4. FET Names   Applied For Suite, Apt. #, etc.   2a. Suite, Apt. #, etc.   58-3286324   5. Certificate of Status Desired   58.75 Additional Fee Required   70 Address   5. Certificate of Status Desired   58.75 Additional Fee Required   70 Additional Fee Required   70 Additional Fee Required   70 Additional Fee Required   70 Address   70 Additional Fee Required   70		IEA PARK UN		Un				
2. Principal Place of Business	1					THIS SPACE	_	
2. Principal Place of Business   22. Making Address   4. FET.Lmber   59-3288324   No. Applied Fig.						1		1
Solite, Apt. #, etc.	2 Principal Pla	ace of Rusiness	2. Mailing Address				Applied For	4
Sulfie, Appl. #, etic 27 City & State 27 City & State 28 29 20 City & State 28 20 20 City & State 20 City & State 20 City & State 20 City & State 20 20 21 22 25 28 28 29 20 20 20 21 21 21 22 25 28 29 20 20 20 20 20 21 21 20 21 20 21 20 21 20 21 20 21 20 21 20 21 20 21 20 21 20 21 20 20 21 20 21 20 21 20 20 21 20 20 21 20 20 20 20 20 20 20 20 20 20 20 20 20		according to the second	— ·				<del></del>	1
City & State    City & State   Country   Zip   Zip   Country   Zip	Suite, Apt. #	#, etc.					¢0 7F	1
Zip	22		27			5. Certificate of Status Desired	Fee Required	
Zip	City & State	•	City & State			· · · · · · · · · · · · · · · · · · ·		T
26   26   29   30   Personal Property Tax due June 30   Yes   No   No   No   No   No   No   No   N				1 0				4
MOORE, MICHAEL M 3710 CORPOREX PARK DRIVE SUITE #300 TAMPA FL 33819  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Siteutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am femiliar with, and accept the oldigations of Sections 607 0502 and 607 1508, Florida Siteutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am femiliar with, and accept the oldigations of Sections 607 0502 and 607 1508, Florida Siteutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and femiliar with, and accept the oldigations of Sections 607 0505, Florida Siteutes.  SIGNATURE    Separate Spirate Park of Period Found Size of Florida Size o		<u>├</u> ¬ '	<b>—</b>	<del>-</del>	У		_ · _ ·	
MOORE, MICHAEL M 3710 CORPOREX PARK DRIVE SUITE #300 TAMPA FL 33819  14 City FL 85 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 registere agent. In milmit with, and accept the obligations of Sections Co050 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere agent. In milmits with, and accept the obligations of Section BOX 5005, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registere agent. In milmits with, and accept the obligations of Section BOX 5005, Florida Statutes  SIGNATURE Sequence speed or protect name of registering agent and site if applicable  PoEO MANE SIGNATURE  DO FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. SAME SIREET ADDRESS  OLIV-ST-ZIP  TITLE  D D DELETE  13. TITLE  D Change Addit  Addit  Addit  Addit  Change Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  14. TITLE  D Change Addit  Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  15. TITLE  D Change Addit  Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  14. TITLE  D Change Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  15. TITLE  D Change Addit  Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  15. TITLE  D Change Addit  Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  5. TITLE  D Change Addit  MANE  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  5. TITLE  D Change Addit  MANE  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  5. TITLE  D Change Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  5. TITLE  D Change Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  5. TITLE  D Change Addit  SIREET ADDRESS  OLIV-ST-ZIP  TAMPA FL 33619  DELETE  5. TITLE  D Change	24			301				┨
3710 CÓRPOREX PARK DRIVE SUITE #300 TAMPA FL 33619  82   Street Address (P.O. Box Number is Not Acceptable)  83   84   City	МОС	<u></u>		81	Name	10. 10. 10. 10. 10. 10. 10. 10. 10. 10.		1
SUITE #300 TAMPA FL 33619  ### City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1509, 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. Thereby accept the appointment as registered agent, and familiar with, and accept the obligations of. Section 607 6505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature byseld or printed came of registered agent and see it applicable.  Take PCEO						(0.0.5		4
TAMPA FL 33819  11. Pursuant to the provisions of Sections (O7 0502 and 607 1508, Flortda Statutes, the above named corporation submits this statement for the purpose of changing its register office or registered agent and accept the orbigations of. Section 607 6505, Flortda Statutes.  SIGNATURE  Strature byted or protect came of registered agent and take it applicable.  NOTE Registered Agent Signature sequent when reinstance)  DATE  12. OF FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IT IT IT.  PCEO DELETE 1.1 TITLE DELETE 1.1 T				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		1
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 register of 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, and accept the obligations of Section 807 0505, Florida Statutes  SIGNATURE  Signature type to prefet come of reputationary of registered agent agent and also if applicable.  12. Of FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  PCEO  DELETE  1.1 TITLE  MAME  SIREET ADDRESS  3710 CORPOREX PARK DR, #300  1.3 SIREET ADDRESS  SITURE ADDRESS  3710 CORPOREX PARK DR, #300  1.3 SIREET ADDRESS  SITURE A		· - · · · · · ·		83	į			1
11. Pursuant to the provisions of Sections (07 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of eight 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, and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE  Signature, byterior pretect name of repretent agent late if applicable.  12.	1730	M A 1 L 55015		94	City		les Ta Cado	J
office or registered agent, or both, in the scept the obligations of. Socilon 607.0505, Florida Statutes  SIGNATURE    12.				54	City		FL   S   Zip Cooe	٦.
agent. I am femiliar with, and accopt the obligations of. Socion 607.0505, Florida Statutes  SIGNATURE  Speakure, byred or protect name of repotence agent and table it applicable  PCEO								]
Segret address   Segret of princed corner of registered agand state if applicables   Involve	11. Pursuant to	o the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the abov	re-named corp	oration submits this statement for the purpo	se of changing its registered	]
Segret address   Segret of princed corner of registered agand state if applicables   Involve	office or re	egi <b>ste</b> red agent, or both, in the State	e of Florida. Such change was	authorized b	y the corporate	oration submits this statement for the purpo ion's board of directors. I hereby accept the	ose of changing its registered a appointment as registered	
TITLE	office or re agent. I an	egi <b>ste</b> red agent, or both, in the State	e of Florida. Such change was gations of, Section 607.0505, F	authorized b Torida Statute	y the corporate	ion's board of directors. I hereby accept the	se of changing its registered appointment as registered	
NAME	office or re agent. I an SIGNATURE	ogistered agent, or both, in the State in familiar with, and accept the oblig Signalure typed or printed name of registered ag	e of Florida. Such change was gations of, Section 607.0505, F	authorized b lorida Statute	y the corporate	ed when reinstating)	appointment as registered	
STREET ADDRESS   3710 CORPOREX PARK DR, #300   13 STREET ADDRESS   14 CITY-ST-ZIP   TITLE	office or reagent. I an SIGNATURE 5	ogistered agent, or both, in the State in familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS AN	e of Florida, Such change was gations of, Section 607,0505, Florid and title if applicable (NO ID DIRECTORS)	authorized b florida Statute	y the corporate	ed when reinstating)	ATE AND DIRECTORS IN 12	15.00
TAMPA FL 33619	office or reagent. I an SIGNATURE 5	ogistered agent, or both, in the State in familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS AN  PCEO	e of Florida, Such change was gations of, Section 607,0505, Florid and title if applicable (NO ID DIRECTORS)	authorized bilorida Statute ITE: Registered Ag  13.  1.1 TITLE	y the corporate	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12	4 (10/02)
TITLE	office or reagent. I an SIGNATURE 5  12.  TITLE NAME	ogistered agent, or both, in the State m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS AN  PCEO MOORE, MICHAEL M	e of Florida, Such change was gations of, Section 607,0505, Florid and title if applicable (NO DD DIRECTORS)  DELETE	authorized b florida Statute  ITE Registered Ag  13.  1.1 TITLE  1.2 NAME	y the corporate	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12	004 (40,00-2)
STREET ADDRESS   3710 CORPOREX PARK DR, #300   23 STREET ADDRESS   CITY-ST-ZIP   TAMPA FL 33619   2.4 CITY-ST-ZIP	office or reagent. I an SIGNATURE 5  12.  TITLE NAME STREET ADDRESS	ogistered agent, or both, in the State m familiar with, and accept the oblig  Signature, typed or product name of repistered ag  OFFICERS AN  PCEO MOORE, MICHAEL M  3710 CORPOREX PARK DR,	e of Florida, Such change was gations of, Section 607,0505, Florid and title if applicable (NO DD DIRECTORS)  DELETE	authorized b florida Statute  ITE: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE	y the corporate	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12	201004 (40,000)
STREET ADDRESS   3710 CORPOREX PARK DR, #300   23 STREET ADDRESS   CITY-ST-ZIP   TAMPA FL 33619   2.4 CITY-ST-ZIP	office or reagent. I an SIGNATURE 5  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	ogistered agent, or both, in the State m familiar with, and accept the oblig  Sepature, typed or printed name of registered age  OFFICERS AN  PCEO  MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619	e of Florida, Such change was gations of, Section 607,0505, Florid and title if applicable (NO AD DIRECTORS DELETE	in authorized befored a Statute  ITE: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE:  1.4 CITY-:	y the corporate	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change	CB2E024 (40,002)
DELETE   D	office or reagent. I an SIGNATURE	ogistered agent, or both, in the State m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS AN  PCEO  MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619  D	e of Florida, Such change was gations of, Section 607,0505, Florid and title if applicable (NO AD DIRECTORS DELETE	authorized b florida Statute  TE: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY:  2.1 TITLE	y the corporate	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change	ODD-004 (40/02)
DELETE   D	office or reagent. I an SIGNATURE To see the s	ogistered agent, or both, in the State m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS AN  PCEO MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619  D  BERNSTEIN, BRADFORD	e of Florida, Such change was gations of, Section 607,0505, Florid and title if applicable (NO DIRECTORS DELETE	authorized b ilorida Statute  ITE: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY:  2.1 TITLE  2.2 NAME	y the corporate	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change	ADDE 004 (40,007)
STREET ADDRESS   3710 CORPOREX PARK DR, #300   3.3 STREET ADDRESS	Office or reagent. I an SIGNATURE TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	ogistered agent, or both, in the State m familiar with, and accept the oblig  Signature, typed or proted name of repistered ag  OFFICERS AN  PCEO MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD  3710 CORPOREX PARK DR,  3710 CORPOREX PARK DR,	e of Florida, Such change was gations of, Section 607,0505, Florida and title if applicable (NO ID DIRECTORS DELETE #300)  DELETE	authorized b lorida Statute  ITE: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE:  1.4 CITY:  2 1 TITLE  22 NAME  2.3 STREE:	y the corporate is.  In address  I Address  I Address	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change	CDSC004 (40/07)
TITLE	Office or reagent. I an SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	ogistered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of registered ag  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619 D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619 D	e of Florida, Such change was gations of, Section 607,0505, Florida and title if applicable (NO ID DIRECTORS DELETE #300)  DELETE	authorized b ilorida Statute  ITE: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY  22 NAME  23 STREE  2.4 CITY	y the corporate is.  In address  I Address  I Address	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition	ODST004 (40/07)
TITLE	Office or reagent. I an SIGNATURE TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	postered agent, or both, in the State m familiar with, and accept the oblig  Signature, typed or printed name of registered ag  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619  D DOCTOROFF, DANIEL	e of Fronda. Such change was gations of. Section 607.0505, Figure 1 and title if applicable (NO 4D DIRECTORS)  DELETE  #300  DELETE	authorized b lorida Statute  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE	y the corporate is.  In address  I Address  I Address	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition	CDOFCO1 (40/03)
NAME STREET ADDRESS CITY-ST-ZIP TAMPA FL 33619  CHAPTER DO DELETE NAME  STREET ADDRESS CITY-ST-ZIP  TAMPA FL 33619  CHAPTER D DELETE S1 TITLE  D DELETE S1 TITLE S1 STREET ADDRESS CITY-ST-ZIP  TAMPA FL 33619  S1 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33619  S1 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33619  S1 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33619	Office or reagent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of repistered age  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619 D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619 D D D D D D D D D D TAMPA FL 33619 D D D T D T D T T T T T T T T T T T T	e of Fronda. Such change was gations of. Section 607.0505, Figure 1 and title if applicable (NO 4D DIRECTORS)  DELETE  #300  DELETE	authorized b Ilorida Statute  13.  1.1 TITLE  1.2 NAME  1.3 STREE  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME	y the corporate is:  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition	ADDICAL MANAY
NAME   KWAII, BRIAN	Office of reagent. I am SIGNATURE  12.  THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of repistered age  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619 D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619 D DOCTOROFF, DANIEL 3710 CORPOREX PARK DR, TAMPA FL 33619	e of Fronda. Such change was gations of. Section 607.0505, F  peni and title if applicable (NO  ND DIRECTORS  DELETE  #3000  DELETE  #3000	authorized b Ilorida Statute  13. 1.1 Title 1.2 NAME 1.3 STREE 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 3.4 CITY- 3.4 CITY-	T ADDRESS ST-ZIP T ADDRESS	ed when (einstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition	ODSESSA (40,002)
TAMPA FL 33619	Office of reagent. I am SIGNATURE  12. THLE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME	postered agent, or both, in the State m familiar with, and accept the oblig  Signature, typed or printed name of repistered ag  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619 D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619 D DCTOROFF, DANIEL 3710 CORPOREX PARK DR, TAMPA FL 33619 D TAMPA FL 33619 D	e of Fronda. Such change was gations of. Section 607.0505, F  peni and title if applicable (NO  ND DIRECTORS  DELETE  #3000  DELETE  #3000	authorized b ilorida Statute  13.  1.1 Title  1.2 NAME  1.3 STREE  2.4 CITY-  3.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY-  4.1 TITLE	y the corporate is.  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition	
TITLE         D         DELETE         5.1 TITLE         □ Change         □ Add/its           NAME         PARTICELU, MARC         5.2 NAME         5.3 STREET ADDRESS         5.3 STREET ADDRESS         5.3 STREET ADDRESS         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP         1.4 CITY-ST-ZIP	Office of reagent. I am SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of repistered age  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619 D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619 D DOCTOROFF, DANIEL 3710 CORPOREX PARK DR, TAMPA FL 33619 D CORPOREX PARK DR, TAMPA FL 33619 D KWAIT, BRIAN	e of Fronda. Such change was gations of. Section 607.0505, Figure and title if applicable (NO ND DIRECTORS DELETE #300)  DELETE #300  DELETE #300	authorized biorida Statute  TE: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY  4.1 TITLE  4.2 NAME  4.3 NAME  4.4 CITY  4.1 TITLE  4.2 NAME  4.4 NAME  4.4 NAME  4.4 NAME	y the corporate is.  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition	ADDIOO (40,00-)
NAME PARTICELU, MARC  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL 33619  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.4 CITY-ST-ZIP	Office of reagent. I am SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of registered age  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619 D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619 D DOCTOROFF, DANIEL 3710 CORPOREX PARK DR, TAMPA FL 33619 D KWAIT, BRIAN 3710 CORPOREX PARK DR, TAMPA FL 33619	e of Fronda. Such change was gations of. Section 607.0505, Figure and title if applicable (NO ND DIRECTORS DELETE #300)  DELETE #300  DELETE #300	authorized b ilorida Statute  13.  1.1 Title 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.4 SFREE 4.4 SFREE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition	CDDC004 (4000-1)
STREET ADDRESS         3710 CORPOREX PARK DR #300         5.3 STREET ADDRESS           CITY-ST-ZIP         TAMPA FL 33619         5.4 CITY-ST-ZIP	Office of reagent. I am SIGNATURE  12. THE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of registered age  OFFICERS AN  PCEO MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD  3710 CORPOREX PARK DR, TAMPA FL 33619  D DOCTOROFF, DANIEL  3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN  3710 CORPOREX PARK DR, TAMPA FL 33619	e of Florida. Such change was gations of. Section 607.0505, Floridand title if applicable (NO ND DIRECTORS DELETE #300)  DELETE #3000  DELETE #3000	authorized b ilorida Statute  13.  1.1 Title 1.2 NAME 1.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 FAREE 4.4 CITY- 4.4 CITY- 4.4 CITY- 4.5 FAREE 4.4 CITY- 4.4 CITY- 4.5 FAREE 4.4 CITY-	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition	CDSE004 (40/07)
CITY-ST-ZIP	Office of reagent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of repistered age  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619  D DOCTOROFF, DANIEL 3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN 3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN 3710 CORPOREX PARK DR, TAMPA FL 33619  D	e of Florida. Such change was gations of. Section 607.0505, Floridand title if applicable (NO ND DIRECTORS DELETE #300)  DELETE #3000  DELETE #3000	authorized b ilorida Statute  13.  1.1 Title  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  4.2 NAME  4.4 CITY-  4.1 TITLE  4.2 NAME  5.5.1 TITLE	y the corporate is.  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition	CDSCOM (40M2)
	Office of reagent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of registered age  OFFICERS AN  PCEO MOORE, MICHAEL M 3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD 3710 CORPOREX PARK DR, TAMPA FL 33619  D DOCTOROFF, DANIEL 3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAFT, BRIAN 3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAFT, BRIAN 3710 CORPOREX PARK DR, TAMPA FL 33619  D PARTICELLI, MARC	#300  DELETE  #300  DELETE	authorized b ilorida Statute  13.  1.1 Title 1.2 NAME 1.3 STREE* 2.4 CITY- 3.1 Title 3.2 NAME 3.3 STREE* 3.4 CITY- 4.1 Title 4.2 NAME 4.4 CITY- 5.1 Title 5.2 NAME 5.1 Title 5.2 NAME	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE TO DELETE 1 6.1 TITLE Change Addition	Office of reagent. I am  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of registered age  OFFICERS AN  PCEO MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD  3710 CORPOREX PARK DR, TAMPA FL 33619  D DOCTOROFF, DANIEL  3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN  3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN  3710 CORPOREX PARK DR, TAMPA FL 33619  D PARTICELLI, MARC  3710 CORPOREX PARK DR	#300    DELETE	authorized b ilorida Statute  13.  1.1 Title  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 Title  2.2 NAME  2.3 STREE  3.2 NAME  3.3 STREE  3.4 CITY-  4.1 Title  4.2 NAME  4.4 CITY-  5.1 Title  5.2 NAME  5.3 STREE  5.1 TITLE  5.2 NAME  5.3 STREE	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition	ADDICON (40M-1)
	Office of reagent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or proted name of registered ag  OFFICERS AN  PCEO MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD  3710 CORPOREX PARK DR, TAMPA FL 33619  D DOCTOROFF, DANIEL  3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN  3710 CORPOREX PARK DR, TAMPA FL 33619  D CORPOREX PARK DR, TAMPA FL 33619  D PARTICELLI, MARC  3710 CORPOREX PARK DR, TAMPA FL 33619	#300  DELETE  #300  DELETE  #300	authorized b ilorida Statute  13.  1.1 Title 1.2 NAME 1.3 STREE* 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE* 3.4 CITY- 4.1 TITLE 4.2 NAME 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREEF 5.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREEF 5.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREEF 5.4 CITY- 5.4 CITY- 5.5 STREEF 5.5 STREEF 5.4 CITY- 5.5 STREEF 5.5 STREE	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Addition	ADDEROA (40/04)
STREET ADDRESS 3710 CORPOREX PARK DR #300 63 STREET ADDRESS	Office of reagent. I am  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	postered agent, or both, in the State m familiar with, and accept the oblig  Signature typed or printed name of registered age  OFFICERS AN  PCEO MOORE, MICHAEL M  3710 CORPOREX PARK DR, TAMPA FL 33619  D BERNSTEIN, BRADFORD  3710 CORPOREX PARK DR, TAMPA FL 33619  D DOCTOROFF, DANIEL  3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN  3710 CORPOREX PARK DR, TAMPA FL 33619  D KWAIT, BRIAN  3710 CORPOREX PARK DR, TAMPA FL 33619  D PARTICELLI, MARC  3710 CORPOREX PARK DR	#300    DELETE	authorized b ilorida Statute  13.  1.1 Title  1.2 NAME  1.3 STREE  1.4 CITY-  2.1 Title  2.2 NAME  2.3 STREE  3.2 NAME  3.3 STREE  3.4 CITY-  4.1 Title  4.2 NAME  4.4 CITY-  5.1 Title  5.2 NAME  5.3 STREE  5.1 TITLE  5.2 NAME  5.3 STREE	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ed whon reinstating)  ADDITIONS/CHANGES TO OFFICERS	ATE AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition	

14. Thereby 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 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.

## **Additional Directors**

NAMES: Derek Dewan

3710 Corporex Park Dr. Ste 300

Tampa, FL 33619

Stephen Berger 3710 Corporex Park Dr. Ste 300 Tampa, FL 33619

T. Joe Willey, Ph. D 3710 Corporex Park Dr. Ste 300 Tampa, FL 33619