

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

FILED  
Mar 26 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000011159 (7)

1. Corporation Name  
RESONICS, INC.



Principal Place of Business  
950 N. ORLANDO AVE.  
SUITE 320  
WINTER PARK FL 32789  
US

Mailing Address  
P.O. BOX 4961  
ORLANDO FL 32802-4961

DO NOT WRITE IN THIS SPACE

|                                |                     |                     |                     |
|--------------------------------|---------------------|---------------------|---------------------|
| 2. Principal Place of Business |                     | 2a. Mailing Address |                     |
| 21                             | Suite, Apt. #, etc. | 26                  | Suite, Apt. #, etc. |
| 22                             | City & State        | 27                  | City & State        |
| 23                             | Zip                 | 28                  | Country             |
| 24                             | Country             | 29                  | Zip                 |
| 25                             | Country             | 30                  | Country             |

|   |                                |
|---|--------------------------------|
| 3. Date Incorporated or Qualified<br>02/09/1995   |                                |
| 4. FEI Number<br>59-3299000   | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/>  | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>   | \$5.00 May Be Added to Fees    |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                                |

9. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 N. ORANGE AVE.  
SUITE 1100  
ORLANDO FL 32801

10. Name and Address of New Registered Agent

|    |  |
|----|--|
| 81 | Name   |
| 82 | Street Address (P.O. Box Number is Not Acceptable) |
| 83 |  |
| 84 | City   |
| 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 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

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          | 10                             | DELETE |
| NAME           | PALMER, CHARLES B              |        |
| STREET ADDRESS | 950 N ORLANDO AVE SUITE 320    |        |
| CITY-ST-ZIP    | WINTER PARK FL 32789           |        |
| TITLE          | D                              | DELETE |
| NAME           | BOBINCHUCK, ROBERT M           |        |
| STREET ADDRESS | 100 CONGRESS AVE SUITE 1010    |        |
| CITY-ST-ZIP    | AUSTIN TX 78701                |        |
| TITLE          | ST                             | DELETE |
| NAME           | PALMER, C. ANDREW              |        |
| STREET ADDRESS | 950 N. ORLANDO AVE., SUITE 320 |        |
| CITY-ST-ZIP    | WINTER PARK FL 32789           |        |
| 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          | D/P                           | Change | Addition |
| 1.2 NAME           | Charles B. Palmer             |        |          |
| 1.3 STREET ADDRESS | 950 N. Orlando Ave., Ste. 320 |        |          |
| 1.4 CITY-ST-ZIP    | Winter Park, FL 32789         |        |          |
| 2.1 TITLE          | D/VP                          | Change | Addition |
| 2.2 NAME           | Robert M. Bobinchuck          |        |          |
| 2.3 STREET ADDRESS | 100 Congress Ave., Ste. 1010  |        |          |
| 2.4 CITY-ST-ZIP    | Austin, TX 78701              |        |          |
| 3.1 TITLE          | S/T                           | Change | Addition |
| 3.2 NAME           | C. Andrew Palmer              |        |          |
| 3.3 STREET ADDRESS | 950 N. Orlando Ave., Ste. 320 |        |          |
| 3.4 CITY-ST-ZIP    | Winter Park, FL 32789         |        |          |
| 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    |                               |        |          |

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, 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.

SIGNATURE:

Charles B. Palmer, President (407)628-4544

CR2E034 (10/97)