FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P95000025372

1. Corporation Name

CYBERGRAPHICS, INC.

Principal Place of Business	Mailing Address
8020 114th Ave N. Suite 2 Largo, FL 34643	8020 114th Ave N. Suite 2 Largo, FL 34643

2. Principal Place of Business — 21 / Suite, Apt. #, etc 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address — 26 / Suite, Apt. #, etc 27 / City & State 28 / Zip 29 / Country 30

3. Date Incorporated or Qualified: 3/29/1995

3a. Date of Last Report:

4. FEI Number: 59-3308458 ☐ Applied For ☐ Not Applicable

5. Certificate 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MICHAEL GERMINO
927 East Klosterman Road
Tarpon Springs, FL 34689

10. Name and Address of New Registered Agent

81 Name: Hutchinson, Lynn B
82 Street Address (P.O. Box Number is Not Acceptable)
83 8020 114th Ave N. Suite 2
84 City: Largo FL 85 Zip Code: 34643

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] Lynn B Hutchinson, President — DATE 4/29/96

12. OFFICERS AND DIRECTORS

TITLE	DPVTS ☒ DELETE
NAME	Jill Mulry
STREET ADDRESS	10451 199th St. N
CITY-ST-ZIP	Seminole, FL 34648
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	DPS ☒ Change ☐ Addition
1.2 NAME	Hutchinson, Lynn B.
1.3 STREET ADDRESS	8020 114th Ave N. Suite 2
1.4 CITY-ST-ZIP	Largo, FL 34643
2.1 TITLE	DVT ☒ Change ☐ Addition
2.2 NAME	Mulry, Jill
2.3 STREET ADDRESS	8020 114th Ave N. Suite 2
2.4 CITY-ST-ZIP	Largo, FL 34643
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	700001869417
4.3 STREET ADDRESS	-06/20/96--01040--032
4.4 CITY-ST-ZIP	***200.00
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	Bank deposit # No Money 60.00

6-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] Lynn B. Hutchinson, President — 4-29-96 — 813-545-0801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)