2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

Jun 14, 2001 8:00 am **DOCUMENT # P95000046765 Secretary of State** 1. Entity Name 06-14-2001 90010 015 ***550.00 INOVIDEA, INC. Principal Place of Business Mailing Address 3819 GARDEN LAKES TERR 3819 GARDEN LAKES TERR AUUVSUUb **BRADENTON FL 34203-7305 BRADENTON FL 34203-7305** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State FEI Number 65-0595086 Not Applicable Zip Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name AMON, SALLY L Street Address (P.O. Box Number is Not Acceptable) 3819 GARDEN LAKES TERR **BRADENTON FL 34203-7305** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition ☐ Change Delete TITLE TITLE MILLER, THELMA J NAME NAME 6111 RIVERVIEW BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209-1344** CITY-ST-ZIP TITLE ☐ Delete Change Addition AMON, SALLY L NAME NAME STREET ADDRESS STREET ADDRESS 3819 GARDEN LAKES TERR CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203-7305** ☐ Delete ☐ Change ☐ Addition TITLE TITLE AMON, KEITH NAME STREET ADDRESS 3819 GARDEN LAKES TERR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203-7305** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

941-751-9924