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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000064286 (4)**

1. Corporation Name

GATE TECHNOLOGIES INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
ONE S OCEAN BLVD SUITE 212 BOCA RATON FL 33432	ONE S OCEAN BLVD SUITE 212 BOCA RATON FL 33432

3. Date Incorporated or Qualified: 08/18/1995
3a. Date of Last Report: N/A

2. Principal Place of Business	2a. Mailing Address
21 2200 NW CORPORATE BLVD	26 2200 NW CORPORATE BLVD
Suite, Apt. #, etc. 22 SUITE 308	Suite, Apt. #, etc. 27 SUITE 308
City & State 23 BOCA RATON FL	City & State 28 BOCA RATON FL
Zip / Country 24 33431 / 25 USA	Zip / Country 29 33431 / 30 USA

4. FEI Number: 65-0617160 ☐ 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

MORGENSTERN, RICHARD L
ONE S OCEAN BLVD
SUITE 212
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name: ROGER R DUBE
82 Street Address (P.O. Box Number is Not Acceptable): 2200 N W CORPORATE BLVD SUITE 308
83
84 City: BOCA RATON FL 85 Zip Code: 33431

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: Roger R Dube, President & CEO — DATE: 2/14/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR RICHARD L. MORGENSTERN ONE S OCEAN BLVD SUITE 212 BOCA RATON FL 33432	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRESIDENT / CEO DR ROGER R DUBE 2655 NW 24th DR BOCA RATON FL 33434	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP / TREASURER MARK MILSTEIN 4400 EMERY IND PKWY SUITE 4 WARRENSVILLE HGTS, OH 44128	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SECRETARY MARTIN A. TRABER 100 N TAMPA ST SUITE 2700 TAMPA FL 33602	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

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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: Dr Roger R Dube — DR ROGER R DUBE — 2/14/96 — 407-883-1135
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #