FILE NOW: FILING [redacted]ER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # P95000072173

1. Corporation Name: Boca Motion, Inc.

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: Sept. 12, 1995
3a. Date of Last Report: —

2. Principal Place of Business
21 1950 Glades Road
Suite, Apt #, etc. 22
City & State 23 Boca Raton, FL
Zip 24 33431 Country 25 USA

2a. Mailing Address
26 1950 Glades Road
Suite, Apt #, etc. 27
City & State 28 Boca Raton, FL
Zip 29 33431 Country 30 USA

4. FEI Number: 65-0628762 — 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
Barry Clayton
1675 Palm Beach Lakes Blvd.
7th Floor
West Palm Beach, FL 33401

10. Name and Address of New Registered Agent
81 Name: Ashling Roche
82 Street Address (P.O. Box Number is Not Acceptable): 1300 S.E. 17th Street Causeway
83 Suite 217
84 City: Fort Lauderdale FL 85 Zip Code: 33316

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: Ashling Roche — Signature (typed or printed name of Registered Agent and title if applicable) — Ashling Roche (NOTE: Registered Agent signature required when reinstating) — 8-13-96 DATE

12. OFFICERS AND DIRECTORS

TITLE	~~Initial Director~~ President
NAME	Steve Ciancio
STREET ADDRESS	51-28 64th Street
CITY-ST-ZIP	Woodside, NY 11377
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President + Treasurer	☒ Change ☐ Addition
1.2 NAME	Brian Saraceno	
1.3 STREET ADDRESS	5289 Bucklhead Circle	
1.4 CITY-ST-ZIP	Boca Raton, FL 33431	
2.1 TITLE	Secretary	☐ Change ☒ Addition
2.2 NAME	Ashling Roche	
2.3 STREET ADDRESS	1300 SE. 17th St. Causeway, #217	
2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33316	
3.1 TITLE	Vice President	☐ Change ☒ Addition
3.2 NAME	Lawrence Grambino	
3.3 STREET ADDRESS	1950 Glades Road	
3.4 CITY-ST-ZIP	Boca Raton, FL 33431	
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	600001927946	
6.3 STREET ADDRESS	-08/21/96--01017--019	
6.4 CITY-ST-ZIP	***225.00	

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: Brian Saraceno, President — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 8-13-96 — Daytime Phone #: (561) 371-4488

CS 8/20/96