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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLOHIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600000390 (0)

LIGHTSYSTEMS TECHNOLOGIES CORP. Principal Place of Business Mailing Address 3141 SE DOMINICA TERR. P.O. BOX 1199 STUART FL 34996 PALM CITY FL (34996 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/26/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3351229 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zio Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GALFOND, DAVID C ESQUIRE #8 SOUTH SEWALL'S POINT ROAD 82 Street Address (P.O. Box Number is Not Acceptable) STUART FL 34996 83 84 City Zip Code 85 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, typicd or punifed harne of registered agent and theid applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition ☐ DELETE 1.1 TO LE TITLE **CANTOR, DONALD** NAME 1.2 NAME 2929 S.E. OCEAN BLVD. 106-7 STREET ADDRESS 1.3 STREET ADDRESS **STUART FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ■ Addition TITLE 21 THLE CANTOR, STUART G NAME 2.2 NAME **98 BIRCHWOOD PARK DRIVE** STREET ADDRESS 2.3 STREET ADDRESS JERICHO NY 11753 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 31 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TiTLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - S1 - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CiTY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS**

14. Thereby 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 from an 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 of the ecceiver or trule impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

OLONIATURE.

Block 12 or Block 13 if changed, o

CITY-ST-ZIP

5-1-98

561-221-0909

FILED

May 18 1998 8:00am

Secretary of State