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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P96000048716 (0)

VIRTUAL 3D, INC.

FILED May 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address											 	IN BILL INN	
720 E PALME BOCA RATON US	_)		720 E PALMETTO PARK RD BOCA RATON FL 33432 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
									06/05/1996				
2. Principal Pl	lace of Busin	oss	7 2	2a. Mailing Address				- 1	4. FEI Number		Ar	plied For	
21				26					65-0672931	Not Applicable			
Suite, Apt	#, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75		
22				27					o. Continuate of States position		Fee Re	equired	
City & State				City & State				1 9	6. Election Campaign Financing		\$5.00		
Zip Country			2	ZID Country				Trust Fund Contribution		Added t			
24	25			29 30				8. This corporation owes or has paid the currept year Intangit Personal Property Tax due June 30. Yes \square No					
9. Name and Address of Currer				_				1	10. Name and Address of New Registered Agent				
IAH	MBY, LOUIS	3 1 10		· · · · · · · · · · · · · · · · · · ·		81	Name	9					
321 ROYAL POINCIANA PLAZA PALM BEACH FL 33480						82	Street	et Address (P.O. Box Number is Not Acceptable)					
PAL	TW BEACH	FL 33480				83							
						64	City			<u> </u>	85 Zip (Code	
44 5		a(C-atta-	- 007.01.00	CO7 4000 Fla	rida Ctatulas	the shau	2 22 200	d corporat	ion aubmits this statement for the	FL	changing if	te registered	
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 hoard 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					4407					DATE	~		
Signature, typied or printed name of registerist agent are title if applicable (NO 12. OF FICERS AND DIRECTORS							ont signatu	re required wit	ners reinstating) ADDITIONS/CHANGES TO OFF		DIRECTOR	3S IN 12	
TITLE	P			DELETE		13. 1.1 TITLE		T	1,00111011070711110101111		☐ Change	Addition	
NAME	KARRAM	. DAVID		1.2 N									
STREET ADDRESS		ALMETTO PA	IRK RD		1.3 STRFET ADDRESS			:					
CITY-ST-ZIP BOCA RATON FL				1.4 CI			'-ST-7IP						
TITLE	VP				DELETE	2.1 TITLE					Change	Addition	
NAME	JONES,						2.2 NAME						
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •				D 2			: [
CITY-ST-ZIP					OFI CTC	2. 4 CITY-1	ST-ZIP	1			T Chann	- Lauren	
TITLE				لبنا	DELETE	3.1 TITLE					☐ Change	Addition	
NAME						3.2 NAME							
STREET ADDRESS						3.3 STREET		'					
CITY-ST-ZIP TITLE				\neg	DELETE	3.4 CITY-1	31- YIF	+			Change	Addition	
NAME						4. 2 NAME						_	
STREET ADDRESS						4.3 STREET	ADDRESS						
CITY-ST-ZIP						4.4 CITY - S							
TITLE					DELETE	5.1 TITLE				-	Change	Addition	
NAME						5.2 NAME							
STREET ADDRESS						5.3 STREET	ADDRESS						
CITY-ST-ZIP						5.4 CITY - S	T-ZIP	1					
TITLE					DELETE	6 1 TITLE					Change	Addition	
NAME						6.2 NAME							
STREET ADDRESS						6.3 STREET	ADDRESS	; [
CiTY-ST-ZIP						6.4 CITY - S	1-2IP	1		1.6 - 11 - 1	and and an ex-		
14. I hereby o	certify that the	: information s	upplied with the	is tiling does n	ot qualify for t	ne exemp	tion sta	ited in Sec	tion 119.07(3)(i), Florida Statutes	. i further ce	mity that the	information	

indicated on this annual report or supplemental anno officer or director of the corporation of the receiver or Block 12 or Block 13 if changed, or on an attachment ate and that my signature shall have the same legal effect as if made under oath; that I am an fecute this report as required by Chapter 607, Florida Statyles; and that my name appears in