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₩2001 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P96000064190 SECRETARY OF STATE DIVISION OF CORPORATIONS Flex Telecommunications, INC. nioct-9 AMII:46 Principal Place of Business Mailing Address 600 East Colonial Deive 600 East Colonial Deve Suite 200 Suite 200 ORlando FL 32803 Orlando, FL 32803 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-339410 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent McNeill H. Gregory 215 North Eola Deive Street Address (P.O. Box Number is Not Acceptable) ORlando F/ 32801 City Zip Code Fl 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 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE Change Addition TITLE DeLozier, John L III 4231 INWOOD LANding Drive Orlando FL 32812 NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITLE Change ☐ Delete TITLE NAME NAME PERKINS, JERRY E 600 East Colonial STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY - ST - ZIP CITY - ST - ZIP TITLE Addition Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP 13. I hereby certify that the information supplied with this filling 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 or 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 changes. attachment with arrandress, with all other like empowered. SIGNATURE: YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # Date

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September 19, 2001

Division of Corporations – Reinstatement Division Attn: Andy Dunlap P O Box 6327 Tallahassee, FL 32314

RE: Flex Telecommunications, Inc.

Dear Mr. Dunlap:

I am writing to state that my company, Flex Telecommunications, Inc., never received a renewal Uniform Business Report for 2001. My comptroller has been out on an unexpected leave of absence since the spring and it has just come to my attention that this matter was never taken care of. Please find enclosed a Uniform Business Report for 2001 and a check for \$150.00 to take care of this matter.

Thank you for your help in resolving this matter.

Very Truly Yours,

Flex Telecommunications, Inc.

John Delozier III

President