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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED **ANNUAL REPORT** Secretary of State 1**9**98 DIVISION OF CORPORATIONS 98 APR 24 PM 1: 03 DOCUMENT # 1. Corporation Name P97000033392 (6) SECRETARY OF STATE TALLAHASSEF, FLORIDA FIBEROPTIC NETWORK, INC. Principal Place of Business Mailing Address 2290 LEE ROAD 2290 LEE ROAD WINTER PARK FL 32789 WINTER PARK FL 32789 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/14/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0743693 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 Trust Fund Contribution 28 Added to Fees Zip Country $\overline{Z_{00}}$ Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Tanios, ishac s 2290 LEE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32789 83 84 City Zip Code 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition EVANS, MARY ANN 2290 LEEROAD TITLE D 1.1 TITLE EVANS, DAVID NAME 1.2 NAME 11000 PALM DRIVE STREET ADDRESS 1.3 STREET ADDRESS Winter PARK, F1.32789 **DESERT HOT SPRINGS CA 92240** CITY-ST-ZIP 1,4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE EVANS, MARY ANN NAME 2.2 NAME JESS E. FORREST 11000 PALM DRIVE STREET ADDRESS 2.3 STREET ADDRESS 2290 LEE ROAD **DÉSERT HOT SPRINGS CA 92240** WinterPARK, 71.32709 CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Addition TITLE 31 TOLE lee. Robert 3.2 NAME TANIOS, ISHACS. 1101 BRICKELL AVE., SUITE 200 STREET ADDRESS 3.3 STREET ADDRESS 2290 LEE ROAD Winter PARK, 71.32789 MIAM# FL 33131 CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition TITLE 4.1 TITLE 000002499840---04/24/98--01070--018 NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS ****150.00 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change ___ Addition TITLE 6.1 TITLE

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 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.

62 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

MALLON

NAME

STREET ADDRESS

CITY-ST-ZIP

2/14/09