FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 04, 1999 8:00 am **PROFIT** FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 05-04-1999 90069 026 ***150.00 DIVISION OF CORPORATIONS 1999 DOCUMENT # P97000053658 1. Corporation Name I. T. INTERNATIONAL, INC. Principal Place of Business 3184 EAST COLONIAL DRIVE DO NOT WRITE IN THIS SPACE 32803 DRLANDO, FL 3. Date Incorporated or Qualifed 6-18-97 4. FFI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3184 E. COLONIAL 26 3184 E. COLONIAL-PAT. 453074 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be ORLANDO, ORLANDO Added to Fees Trust Fund Contribution Country 8. This corporation owes the current year Intangible 32803 32803 USA Yes □No 29 Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name JOHN D. MAKTINEL Street Address (P.O. Box Number is Not Acceptable) 3184 EAST COLONIAL DR. 83 a 32903 Zip Code 84 City 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. (NOTE: Registered Agent signature re Signature, typed or printed name of registered agent and title if applicable CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13, Change Addition PRESIDENT DELETE 1.1 TITLE JOHN D. MAKTINE 2 1.2 NAME 3184 E. COWNIAL DR 1.3 STREET ADDRESS STREET ADDRESS CRELAND O CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE 2.1 TITLE ☐ Change Addition 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Addition 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE ☐ Change 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS

14. I hereby 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

22

12.

TITLE

NAME

TITLE

TITLE

NAME

TITLE

NAME

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

☐ DELETE

407-894-0076

☐ Change

Addition