2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9700062961 Aug 10, 2000 8:00 am Secretary of State 1. Entity Name MAYER RESEARCH TECHNOLOGIES, INC. 08-10-2000 90004 013 ***150.00 Principal Place of Business Mailing Address 6290 SW 92ND ST. 6290 SW 92ND ST. **MIAMI FL 33156** MIAMI FL 33156 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0817209 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 MAYER, PAUL Street Address (P.O. Box Number is Not Acceptable) 6290 SW 92ND ST. MIAMI FL 33156 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI E TITI F ☐ Chance ☐ Addition ☐ Delete NAME MAYER, PAUL NAME STREET ADDRESS 6290 SW 92ND STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 ☐ Change ☐ Addition TITLE ☐ Delete TITLE MAYER, JOAN W NAME NAME STREET ADDRESS 6290 SW 92ND STREET STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33156** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE WALLING SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTORY

7-20-2k 305666 4034

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Principal Place of Business 6290 SW 92ND ST. MIAMI FL 33156		Mailing Address 6290 SW 92ND ST. MIAMI FL 33156-1866					park Álfa	n
2. Principal Place of Business		3. Mailing Address		_				
Suite, Apt. #, 9tc.		Suite. Apt. # etc.		DO NOT WRITE 11 THIS SPACE				
City & State		City & State		4. F	El Number 65-0817209		·	y 4: Herio
Z.b Country		Zic Country		5. C	ertificate of Status Desired	\$8. 7	75 Aac: Required	itiona I
	6. Name and Address of Curren	t Registered Agent	 Name	7. N	ame and Address of New Register	ed Agent	t	
MAYER, PAUL 6290 SW 92ND ST. MIAMI FL 33156 8. The above named entity submits this statement for the purpose of changing			Street Address (P.O. Box Number is Not Acceptable) City					
SIGNATURE Signature tided of primed rame in red were lided. 9. This corporation is eligible to satisfy its intandro Tax filling requirement and elects to do so. (See criteria on back)		e	+ 171 1,72 Hisbory (1 − 1 110 + 15 € 121 TM		10. Election Campaign Financing Trust Fund Contribution DITIONS/CHANGES TO DEFICERS		Yaasa	O May 8
TITLE NAME STREET ADDRESS	P MAYER, PAUL 6290 SW 92ND STREET	DIRECTORS Deate	12. TITLE TAME STREET ADDRESS	ADL	HIONS/CHARGES IN OFFICERS	=	Trame	主题
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TITLE LIAME STREET AGGRESS LITY ST-CP		· Delete	TITLE [MAME] STREET ADDRESS CITY-ST-ZIP				·	Ξ - ::

13. Thereby certify that the information supplied with this roing does not quality for the exemption stated in Section 119 07(3)(i) Florida Statutes. Turner certify, that the increase in discrete on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under part, that I um an online is 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 Brock 1 or a little thanged, or on an attachment true an appears with all other like empowered.

A Hach mont owny 484 Just 1971000062961 CHNOLOGIES, INC. MAYER RESEARCH TECHN

July 20, 2000

Kathleen Harris **Division of Corporations** Uniform Business Report Filings P.O.Box 1500 Tallahassee, Florida 32302-1500

Dear Ms. Harris:

(gary and stacey) Pursuant to our phone conversation this morning, I am enclosing a copy of the original form and enclosing a check for \$150 to replace the one sent on April 24th 2000 with the original form. The check has not cleared as of this time.

Thank you for your kind attention.

Sincerely Yours.

Paul W Mayer M.D.

Mayer Research Technologies Inc.

land W. Mayer MD