FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jun 27, 2001 8:00 am DOCUMENT # \$970000 70338 **Secretary of State** 06-27-2001 90007 021 ***150.00 technowledge, inc. Principal Place of Business Mailing Address 1180 SW 16th Street 1180 SW 16th Street Boca Raten FL 33486 Boca Raton FL 33486 A0075131 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0777031 Not Applicable Zip COUNTY 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 LISA Shaw Street Address (P.O. Box Number is Not Acceptable) 1180 SW 16th Street Boca Raten FL 33486 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of Stat 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. president TITLE Addition ☐ Delete TITLE ☐ Change Lisa Shaw HAME HALE 1180 SW 16th St STREET ADDRESS STREET ADDRESS BOCARATON FL 33486 CITY-ST-ZIP CITY-ST-ZIP MLE ☐ Addition TITLE ☐ Delete Change NAME HALF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CSTY-ST-7IP TITLE ☐ Deleta TITLE Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CATY-ST-ZIP TITLE ☐ Delete Change ☐ Addition HASE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE Delete TITLE Change Addition

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 policies, with all other like empowered.

STREET ADORESS CITY-ST-ZIP

NAME

SIGNATURE:

HAME

STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

6/18/01 561.620,2950

-- g

AHachment

ph panox post paton

AOD Tolda 33486

t: 561.620.2950

f: 561.620.2949

technowledge

A creative resource.

15 June 2001

State of Florida Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed please find a completed Uniform Business Report along with the \$150 corporate renewal fee. I spoke with Michelle in Reinstatements on 15 June, and she recommended I include this letter with the renewal explaining that the address change we sent in last summer was never noted on our account. Please note that the Dept. of Revenue received the updated address information; this was sent at the same time. Additionally, we have always sent in our annual reports timely, and we would appreciate your consideration.

Our new address is as follows:

technowledge, inc. 1180 SW 16th Street Boca Raton, FL 33486 tel: 561.620.2950

fax: 561.620.2949

Thank you in advance for your assistance.

Sincerely,

Lisa A. Shaw

President