HILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00 KMEND AMENDED PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT rillu Secretary of State EVISION OF CORPORATIONS 1999 DIVISION OF CORPORATIONS P970000 &7780 DOCUMENT # 99 OCT -5 PM 2: 34 1. Corgoration Name CONTRACT TECHNOLOGIES, INC. Priminal Place of Business Mailing Address 595 SW 13th TERRACE, SUITE B POMPANO BEACH, FL 33069 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-079-5128 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes the current year Intangible 25 ZNo 24 29 30 Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent AUGUSTUS E. RANEY, JR
Street Address (P.O. Box Number is Not Acceptable) 5100 N. FEDERAL HIGHWAY #300 City 11. Fursuant 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 agent on both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and faculty and accept the obligations of, Section 607,0505, Florida Statutes. AUGUSTUS E. RANEY, JR (0-4.59 SIGNATURE CR2E034 (11/98) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE PRESIDENT, SECRETATY, 11TITLE ☐ Change Addition 1.2 NAME DIRECTOR 100003012961--10/12/99--01061--023 1.3 STREET ADDRESS AUGUSTUS E. RANEY, JR 5100 N. FED. HWY, #300, FT. LAUD, *****61.25 *****61.25 99308 21 TITLE [] Change DIRECTOR STEVEN BATES 22 NAME 23 STREET ADDRESS 105 13th STREET (11) (1-20) 2 4 CITY-ST-ZIP COLUMBUS, GA 31901 THE DELETE 3 1 TITLE [] Change Addition 1,548 3.2 NAME SHIFT MARKET 33 STREET ADDRESS CH5 St 29 3.4. CITY-ST-ZIP THE DELETE 4.1 TITLE [] Change I Addition HVY 4.2 HAME STORY LABORDES 4.3 STREET ADDRESS 715, 51.20 4.4 CITY-ST-ZIP 1-11-4 [] DELETE Change Addition 5.1 TITLE 605810 5.2 NAME 53 STREET ADDRESS CHY-SE ZIP 54 CITY-ST-ZIP 6.1 TITLE [] DELETE TOLE Addition 11/2/5 6.2 NAME STREET MODRES 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 angular report is true and accurate and that my signature shall have the same tegal effect as if made under oath; that I am an officer or director of the corporation or the feedber of trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Blork 12 or Block 13 if changed of an althought with an address, with alt other like empowered.

SIGNATURE: (

MATURE AND TWEED OF REINIFED NAME OF SIGNING DEFICER OR DIRECTOR

OF THE STATE OF T

AUGUSTUS É.

954.492.5383