2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003
Secretary of State

DOCUMENT# P98000000085

Entity Name: TECHNOLOGY TRANSFER INFORMATION SYSTEMS, INC.

Current Principal Place of Business:

14497 N DALE MABRY HWY, STE 200
TAMPA, FL 33618

New Principal Place of Business:

3820 NORTHDALE BLVD.
SUITE 200B
TAMPA, FL 33624

Current Mailing Address:

14497 N DALE MABRY HWY, STE 200
TAMPA, FL 33618

New Mailing Address:

3820 NORTHDALE BLVD.
SUITE 200B
TAMPA, FL 33624

FEI Number: 59-3514594 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIVERA, LOUIS C
14497 N DALE MABRY HWY, STE 200
TAMPA, FL 33618

Name and Address of New Registered Agent:

RIVERA, LOUIS C
3820 NORTHDALE BLVD.
SUITE 200B
TAMPA, FL 33624

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: _____ 04/23/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: RIVERA, LOUIS C
Address: 12001 STEPPINGSTONE BLVD
City-St-Zip: TAMPA, FL 33653

Title: VD ( ) Delete
Name: COATS, MICHEALS A
Address: 2518 REGAL RIVER RD
City-St-Zip: VALRICO, FL 33594

Title: DS ( ) Delete
Name: FOSKEY, ANTHONY A
Address: 18814 FOREST GLEN CRT
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUIS C RIVERA DP 04/23/2003
Electronic Signature of Signing Officer or Director — Date