FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9800044692

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90144 015 ***150.00

1. Corporation Name UPSCOPE INTERNATIONAL, INC. Mailing Address Principal Place of Business 643 OAK TERR. DR., SUITE 4A 643 OAK TERR, DR., SUITE 4A LEESBURG FL 34748 LEESBURG FL 34748 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/15/1998 FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes the current year Intangible Country Zip Zip **X**No [] Yes 30 Personal Property Tax 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LOUDER, ROBERT J Street Address (P.O. Box Number is Not Acceptable) 82 643 OAK TERR. DR., SUITE 4A LEESBURG FL 34748 83 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. SIGNATURE INOTE. Registered Agent signature ring lired when reinstating; Signature, typed or printed name of registered agent and Litre if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13 Change DELETE 1.1 TITLE TITLE 1.2 NAME LOUDER, ROBERT J NAME 643 OAK TERR. DR., SUITE 4A 1.3 STREET ADDRESS STREET ADDRESS LEESBURG FL 34748 1.4 CITY-ST-ZIP CITY-ST-ZIF Change [Addition [] DELETE 2 1 TITLE TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS ∠ 4 C TN ST-7IP CITY-ST-ZIP DELETE ☐ Change Addition 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 3.2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 52 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6 1 TITLE ☐ Change Addition TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

14. 1 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.

SIGNATURE:

3/13/99 352-315-072

CR2E034 (11/98)