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

May 13, 1999 8:00 am Secretary of State

05-13-1999 90044 019 ***158.75

DOCUN	JENT	#	P980000	56992

1. Corporation Name

MANTA TECHNOLOGIES GROUP, INC.

Principal Place of Business

8030 Peters Road, Ste. D100

Plantation, FL 33324

Same

Mailing Address

3. Date incorporated or Qualifed 06/25/08

					00/23/30		
2.	Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
1	8030 Peters Road	26 Same			65~0852735		Not Applicable
Suite, Apt. #, etc. Suite, 2 Suite D100 27		Suite, Apt. #, etc.			5. Certifcate of Status Desired		.75 Additional ee Required
City & State 3 Plantation, FL		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
4	Zip Country 33324 25 USA	Zip Co 29 30	untry		This corporation owes the current year l Personal Property Tax.	Intangible Ye	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
			81	Name			
Michael L. Feinstein 888 E. Las Olas Blvd., Ste. 700		82	82 Street Address (P.O. Box Number is Not Acceptable)				
Fort Lauderdale, FL 33301			83				
			84	City		85	Zip Code

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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE Alfred R. Sackett NAME 12 NAME 8030 Peters Road, Ste. D100 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP Plantation, FL 33324 1.4 CITY-ST-ZIP ☐ DELETE Change ☐ Addition TITLE 2.1 TITLE S/T 22 NAME Dorine G. Sackett 2.3 STREET ADDRESS STREET ADDRESS 8030 Peters Road, Ste. D100 CITY-ST-ZIP 2.4 CITY-ST-ZIP Plantation, FL 33324 □ DELETE TITLE 3.1 TITLE ☐ Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE 4.1 TITLE Change Addition 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE TITLE Change ☐ Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I 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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)