2002 UNIFORM BUSINESS REPORT (UBR)

May 05, 2002 8:00 am Secretary of State P99000018149 DOCUMENT # 1. Entity Name 05-05-2002 90014 043 ***150 00 FORTRESS GLOBAL TECHNOLOGIES. INC. Mailing Address Principal Place of Business 8895 N MILITARY TRAIL 8895 N MILITARY TRAIL SUITE 100-C SUITE 100-C PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0909959 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required _7._Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCOTT, ALAN F JR Street Address (P.O. Box Number is Not Acceptable) 411 NORTHLAKE CT APT B NORTH PALM BEACH FL 33408 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE 8895 N. Military Trail, Ste 100C NAME HERNANDEZ, ROBERT STREET ADDRESS 5595 N. MILITARY TRAIL, STE 100C STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS FL 33410 CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME KENNEDY, GEORGE W NAME STREET ADDRESS STREET ADDRESS 6851 JERICHO TURNPIKE CITY-ST-ZIP CITY-ST-ZIP SYOSSET NY 11791 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME NANDY, BRUCE 8895 N. MILITARY TRAIL STE 100C STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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

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changed, or on an attachment y Qy 4/18/02 (516)682-0700