€2∰00 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P990000 32328 FILFD 00 DEC 27 PH 4: 37 Heatware Computers Inc. SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 9101 Lake Ridge Blvd. #23 Boca Raton, FL 33496 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEi Number Applied For . 4 65-0909212 Not Applicable Zip Country Country 7in \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent James Hontanus 9101 Lake Ridge Blvd. #23 Street Address (P.O. Box Number is Not Acceptable) Boca Raton, Fl. 33496 City Zip Code FL mits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The above named entity is SIGNATURE. ed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible -\$5.00 May Be Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS ☐ Addition TITLE ☐ Delete TITLE James Hontanus NAME NAME 9101 Lake Ridge Blvd. #23 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Boca Raton, FL 33496 CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 000003590740-TITLE -Delete TITLE NAME NAME -01/29/01--01129--017 STREET ADDRESS STREET ADDRESS ****150.00 ****150.00 CITY-ST-ZIP CITY-ST-7IP TIT) F Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling toes 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 noth; that I am an officer or director of the corporation or the receiver or flustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: X

NOTYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone 4

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HEATWAVE COMPUTERS INC. DOC.#P99000032328

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I FURTHER STATE I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT.

THANK IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORPYALLY,
JAMES MONTANUS
PRESIDENT