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

FILED PROFIT Apr 14 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S72105 B M T THERMOGRAPHERS, INC. Principal Place of Business Mailing Address 13635 N.W. 7TH AVE. 13635 N.W. 7TH AVE. N. MIAMI FL 33168 N. MIAMI FL 33168 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/09/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0279322 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Bí Name PRADA, JOSE 13635 N.W. 7TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) N. MIAMI FL 33168 83 84 City 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, typod or printed name of registered agains and title if applicable (NOTE Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE PRADA, JOSE NAME 1.2 NAME 2481 NW 1915t. 18797 NW 78TH PLACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI LAKES FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE PRADA, MARIA E. SCHIFFER-PRADA, BETH NAME 2.2 NAME 8481 NW 191 St. **18797 NW 78TH PLACE** STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL FC 2.4 CITY-ST-ZIP CITY-ST-ZIP S DELETE Change Addition TITLE 3.1 TITLE WATSON, MARIA NAME 3.2 NAME **18777 NW 78TH PLACE** STREET ADORESS 3.3 STREET ADDRESS MIAMI LAKES FL CITY-ST-ZIP 3.4. CITY - \$1 - 7IP DELETE Change Addition TITLE 4 1 TITLE PRADA, JAIME G NAME 4. 2 NAME 18781 NW 78TH PL STREET ADDRESS 43 STREET ADDRESS 33015 MIAMI LAKES FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 changed, or on an attachment with an address.

6.4 CITY - ST - ZIP

CIGNATIDE.

CITY-ST-ZIP

4/7/02

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