FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$55 May 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT O STATE **CORPORATION** Sandra B. Morth Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORA IONS DOCUMENT # (8)**ACUITY SYSTEMS INCORPORATED** Principal Place of Business Mailing Address 2684 S.W. 23 TERRACE 2684 S.W. 23 TERRACE FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/30/1992 4. FEI Number Applied For 65-0337487 Not Applicable \$8.75 Additional 6. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 29 -Name and Address of Current Registered Age 10. Name and Address of New Registered Agent 81 BUDNICK, ROBERT J 2684 S.W. 23 TERRACE 82 **DOCK 11** FORT LAUDERDALE FL 33312 83 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this stands of fice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors agent it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. tement for the purpose of changing its registere hereby accept the appointment as registered SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE TITI F BUDNICK, ROBERT J. 1.2 NAME NAME 2184 S.W. 23 TERRACE, DOCK 11 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY - ST - ZIP 1.4 City-ST-7IP DELETE TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 7ITI F 5.1 TIZLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 6.1 TITLE TITLE NAME 6.3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information or is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address. 14. I hereby certify that the informat indicated on this annual report officer or director of the corporablock 12 or Block 13 if change

SIGNATURE: