2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

DOCUMENT # **V36827** May 16, 2000 8:00 am Secretary of State 1. Entity Name MEDITEK-CHATHAM INDUSTRIES, INC. 05-16-2000 90043 040 ***150.00 Principal Place of Business Mailing Address 250 S. AUSTRALIAN AVE 33 MAIN STREET 9TH FLOOR CHATHAM NJ 07928 WEST PALM BEACH FL 33401-5018 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 59-3122787 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code 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 DATE Signature, typed or printed 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 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Addition __ Change CD VCFO Delete TITLE TITLE RICHEY, LE NAME NAME AU ANDREW SHAW 250 S. AUSTRALIAN AVE, 9h FC 250 S. AUSTRALIAN AVE, 9TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP WEST PALM BEACH, FL 33401 WEST PALM BEACH FL 33401 ☐ Addition Change ☐ Delete TITLE TITLE PAUL, JOSEPH A. NAME STREET ADDRESS STREET ADDRESS 250 S. AUSTRALIAN AVE, 9TH FLOOR CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME HARTLEY, KEITH NAME STREET ADDRESS 250 S. AUSTRALIAN AVE, 9TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Addition TITLE Delete TITLE MOOR, WAYNE NAME NAME STREET ADDRESS STREET ADDRESS 250 S. AUSTRALIAN AVE. 9TH FLOOR CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 Change Addition Delete TITLE TITLÉ HARKINS, FRANCIS J JR NAME 250 S. AUSTRALIAN AVE, 9TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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