FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V55945** **(2)**

1. Current Corporate Name:
SOLITON INTERNATIONAL, INC.

Principal Address of Business:
3877 WATERVIEW LOOP
#603
WINTER PARK FL 32792
US

Mailing Address:
3877 WATERVIEW LOOP
#603
WINTER PARK FL 32792
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/07/1992**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business
21

2a. Mailing Address
26

State Agent Name
22

State Agent Name
27

City & State
23

City & State
28

Zip / County
24 / 25

Zip / County
29 / 30

4. FEI Number: **15-9276554**
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

HAGEN, R. S
3877 WATERVIEW LOOP
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 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 I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Typed or Printed Name of Registered Agent) (Registered Agent's Signature) (Date)

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: KARKHANIS, PARAG A.
STREET ADDRESS: 1352 TWIN RIVERS BLVD.
CITY, ST, ZIP: OVIEDO FL

TITLE: D
NAME: WADHWA, SUNIL
STREET ADDRESS: 3877 WATERVIEW LOOP
CITY, ST, ZIP: WINTER PARK FL

TITLE: D
NAME: HAGEN, ROBERT S.
STREET ADDRESS: 413 S. LAKEMONT AVE.
CITY, ST, ZIP: WINTER PARK FL

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19

TITLE: D ☐ Change ☑ Addition
NAME: Diane R. Karkhanis
STREET ADDRESS: 1352 Twin Rivers Blvd
CITY, ST, ZIP: Oviedo FL 32765

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY, ST, ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY, ST, ZIP

14. To the best of my knowledge, the information contained herein is complete, accurate and true. I am aware that false information submitted in a document to the Department of State pursuant to Chapter 607, Florida Statutes, constitutes a felony of the third degree punishable as provided in s. 775.082, s. 775.083, or s. 775.084, Florida Statutes.

SIGNATURE: [signature] PARAG KARKHANIS 5/1/95 407-671-3555

SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR (Date) (Telephone #)

0048625 CP