

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001670

Entity Name: DREAMWARE, INC.**Current Principal Place of Business:**405 TRADEWINDS
NAPLES, FL 34108**Current Mailing Address:**405 TRADEWINDS
NAPLES, FL 34108 US**FEI Number:** 32-0469830**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PHELPS, PETER
405 TRADEWINDS
NAPLES, FL 34108 US*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:**

Electronic Signature of Registered Agent

Date**Officer/Director Detail :**Title VP, DIRECTOR
Name HARMON, BRYAN
Address 405 TRADEWINDS AVENUE
City-State-Zip: NAPLES FL 34108Title VP, DIRECTOR
Name ANAGNOSTOU, NICHOLAS
Address 405 TRADEWINDS AVENUE
City-State-Zip: NAPLES FL 34108Title INTERIM CEO AND CFO, DIRECTOR
Name PHELPS, PETER
Address 405 TRADEWINDS AVENUE
City-State-Zip: NAPLES FL 34108Title VP, DIRECTOR
Name SPELLBERG, DAVID
Address 405 TRADEWINDS AVENUE
City-State-Zip: NAPLES FL 34108Title DIRECTOR
Name CARD, LEWIS
Address 405 TRADEWINDS
City-State-Zip: NAPLES FL 34108

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PETER PHELPSINTERIM CEO AND CFO, 04/16/2018
DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date