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PROFIT' CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000006075

1. Corporation Name

APPLIED	DATA TECHNOLOGY, INC.							
Principal Place	e of Business	Mailing Address				(IS\$1)\$6 till ibisi kili saili asili asili asili asili asili asili asili		
10151 BARNES CANYON ROAD TWO PENN PLAZA, 26FL, TA SAN DIEGO CA NEW YORK NY 10121-0032				(
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 12/13/1995		
2. Principal Place of Business 2a. Mailing Add			dress			4. FEI Number Applied F	or	
21		26				33-0297326 Not Appli	cable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	⊢ '''			E Cartifonto of Status Basicad	\$8.75 Additional Fee Required	
22		27	_			ree Required		
City & Stat	r e	⊢ '	City & State			6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees		
23		28					5	
Zip	Country	Zip	_	intry		8. This corporation owes the current year Intangible Personal Property Tax Yes No		
24	25	29	30	ı -		Personal Property Tax. LYes L/No 10. Name and Address of New Registered Agent		
	9. Name and Address of Curren	t Registered Agent		81	Name			
THE	PRENTICE-HALL CORPORATION	SYSTEM, INC.						
110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301				82	Street Address (P.O. Box Number is Not Acceptable)			
				83	-			
176	DA MOSEE LE SESSI			03				
				84	City	FL 85 Zip Code		
				Ш	L	d corporation submits this statement for the purpose of changing its registr	arad .	
office or r agent. I a	to the provisions of Sections 607.050, registered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was a	uthonzed	j by	the corp	poration's board of directors. I hereby accept the appointment as registere	d	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	Registered	l Ágen	it signature i	e required when reinstating) DATE	_	
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12	
TITLE	P	☐ DELETE	1.1 TI	TLE		☐ Change ☐ A	Additio	
NAME	LASSWELL, JAMES B		1.2 N	AME				
STREET ADDRESS	AGASA MADNICO GANIVON DOAD			1.3 STREET ADDRESS		s		
CITY-ST-ZIP SAN DIEGO CA			14 C	1.4 CITY-ST-ZIP				
TITLE	VSD DELETE			2.1 TITLE		☐ Change ☐	Additio	
NAME			22 N	AME				
STREET ADDRESS	THE OFFICE OF STATE OF A 7A				T ADDRESS	s		
	NEW YORK NY							
CITY-ST-ZIP	VTD DELETE			2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change	Additio	
NAME	DIGIA. ROBERT	_ _	3.2 N	AME				
STREET ADDRESS	DAYO DOWNOON MANIA DI AZA		4	3.3 STREET ADDRESS		s		
CITY-ST-ZIP	NEW YORK NY							
TITLE				3.4. CITY-ST-ZIP		☐ Change ☐	Additio	
NAME	EFFINGER, J L		4,21					
	THO DENINOVI VANUA DI AZA				T ADDRESS	s		
STREET ADDRESS	NEW YORK NY			ITY-SI				
CITY-ST-ZIP	D	☐ DELETE	5.1 T		1-4JF	Change D	Additio	

6.4 CITY-ST-ZIP CITY-ST-ZIP 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, with all other like empowered.

5.2 NAME

6.1 TITLE

62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ABLON, R. RICHARD

NEW YORK NY

TWO PENNSYLVANIA PLAZA

□ DELETE

(212) 868-6133

☐ Change

☐ Addition