


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 29, 1999 8:00 am
Secretary of State

07-29-1999 90013 006 *1,100.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L50067

1. Corporation Name
SENTECH EAS INTERNATIONAL, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 484 S W 12TH AVE DEERFIELD BEACH FL 33442-3108 US	Mailing Address 484 S W 12TH AVE DEERFIELD BEACH FL 33442-3108 US
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3. Date Incorporated or Qualified 02/09/1990	
4. FEI Number 65-0172724	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Country 30

9. Name and Address of Current Registered Agent POZENSKY, SAUL 484 SW 12TH AVE DEERFIELD BEACH FL 33442		81 Name	10. Name and Address of New Registered Agent	
		82 Street Address (P.O. Box Number is Not Acceptable)		
		83		
		84 City	FL	85 Zip Code

11. Pursuant to the provisions of sections 607.0502 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 accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE ON FILE (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD SPAGNA, RICHARD J. <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5158 NW 52ST	1.2 NAME	
STREET ADDRESS	COCONUT CREEK FL 33073	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PD POZENSKY, SAUL <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	6503 N. MILITARY TRAIL APT. 1204	2.2 NAME	
STREET ADDRESS	BOCA RATON FL 33496	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VTS MEGGISON, RONALD L. JR. <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1504 CHADWICK COURT	3.2 NAME	
STREET ADDRESS	BOYNTON BEACH FL 33462	3.3 STREET ADDRESS	704 New Lake Drive
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Boynton Beach, FL 33426
TITLE	D MULHARE, EDWARD A. <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	686 WESTVIEW COURT	4.2 NAME	
STREET ADDRESS	RIVERDALE NJ 07661	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D RESANOVICH, MILAN <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	21 ROBINHOOD LANE	5.2 NAME	
STREET ADDRESS	CHATHAM NJ 07928	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D NICOLETTE, THOMAS A <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	33 SPRINGHOLLOW RD	6.2 NAME	
STREET ADDRESS	CENTERPORT NY 11721	6.3 STREET ADDRESS	7 Spring Hollow Road
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Centerport, N.Y. 11721

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 in an attachment with an address.

SIGNATURE: RONALD L. Meggison, Jr. Date: 7/9/99 9:54-426-2915 X311

CR2E034 (5/99)