FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90179 029 ***150.00

OCUMENT #	P93000030659
Corporation Name	. 0000000000

NOESIS CAPITAL CORP.

D

Principal Place	e of Business	Mailing Address		
1801 CLINT MO BOCA RATON F		1801 CLINT MOORE RD BOCA RATON FL 33487		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				04/24/1993
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0438744 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired
City & State	е	City & State		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 3	o	Personal Property Tax.
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered Agent
			81 Nan	ame
	s, cory B. Clint Moore RD		82 Stre	treet Address (P.O. Box Number is Not Acceptable)
	A RATON FL 33487		83	
1 000	A RATOR I E 30407		83	
			84 City	FL 85 Zip Code
office or o	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligate	of Florida. Such change was aut	norized by the co	amed corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE				nature required when reinstation). DATE
	Signature, typed or printed name of registered agen	·- <u>'</u>		nature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AN	D DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D Letschert, Nico B		12 NAME	
NAME	1801 CLINT MOORE RD		1.3 STREET ADDRE	DECC
STREET ADDRESS	BOCA RATON FL 33487		1.4 CITY-ST-ZIP	i
CITY-ST-ZIP TITLE	T	□ DELETE	2,1,T/TLE	☐ Change ☐ Addition
NAME	SPITZBERG, JEREMIAH	,	2.2 NAME	·
STREET ADDRESS	1801 CLINT MOORE RD		2.3 STREET ADDRE	ORESS
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	· ·		3.2 NAME	, '
STREET ADDRESS	, ·		3.3 STREET ADDRE	PRESS
CITY-ST-ZiP			3.4. CITY+ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRE	PRESS

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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

Change

Change

☐ Addition

Addition