

**FILED**  
**Apr 06, 1999 8:00 am**  
**Secretary of State**

04-06-1999 90014 017 \*\*\*150.00

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P98000056210**

1. Corporation Name  
**MITOP, INC.**



Principal Place of Business      Mailing Address  
~~5215 SW 5TH PLACE~~      ~~5215 SW 5TH PLACE~~  
~~CAPE CORAL FL 33914~~      ~~CAPE CORAL FL 33914~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 x <b>4414 DEL PRADO BLVD.</b> Suite, Apt. #, etc. 22 x <b>SUITE # 1</b> City & State 23 x <b>CAPE CORAL FLORIDA</b>		2a. Mailing Address 26 x <b>4414 DEL PRADO BLVD.</b> Suite, Apt. #, etc. 27 x City & State 28 x <b>CAPE CORAL FLORIDA</b>		3. Date Incorporated or Qualified <b>06/22/1998</b>	
24 <b>33904</b> 25 <b>LEE</b>		29 <b>33904</b> 30 <b>LEE</b>		4. FEI Number <b>65-0849893</b>	
2. Principal Place of Business		2a. Mailing Address		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 x <b>CAPE CORAL FLORIDA</b>		28 x <b>CAPE CORAL FLORIDA</b>		6. Election, Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 <b>33904</b> 25 <b>LEE</b>		29 <b>33904</b> 30 <b>LEE</b>		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
~~DE PASQUALE, FREDERICK~~  
~~5215 SW 5TH PLACE~~  
~~CAPE CORAL FL 33914~~

10. Name and Address of New Registered Agent

81 Name	<b>SVEN MILBERG</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>4922 SW 2 RD AVE</b>
83	
84 City	<b>CAPE CORAL FL</b>
85 Zip Code	<b>33914</b>

-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: *Sven Milberg*      DATE: **6/29/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<b>DPT</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<del>MILBERG, SVEN</del>	1.2 NAME	<b>MILBERG, SVEN</b>
STREET ADDRESS	<del>5215 SW 5TH PLACE</del>	1.3 STREET ADDRESS	<b>4414 DEL PRADO BLVD.</b>
CITY-ST-ZIP	<del>CAPE CORAL FL 33914</del>	1.4 CITY-ST-ZIP	<b>CAPE CORAL, FL 33904</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE: *Sven Milberg*      DATE: **3/26/99**      Daytime Phone #: **941 541 1485**

CR2094 (4/1/98)