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

Mailing Address 10010 CRYSTALLINE CT ORLANDO FL 32836

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # 627085

CORTRAN INTERNATIONAL, INC.

Principal Place of Business
10010 CRYSTALLINE CT ORLANDO FL 32836 US

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90255 024 \*\*\*150.00



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DO NOT WRITE IN THIS SPACE

								3. Date Incorporated or Qualifed				
			A4-10: Add					06/21/1979 4. FEI Number	An	plied For		
2. Principal P	ace of Business	$\vdash$	. Mailing Address							t Applicable		
21	H	26	Suite, Apt. #, etc.					59-1959713 ss		Additional		
Suite, Apt.	#, etc.	27	Suite, Apr. #, etc.						Fee Re			
City & State	9	Т'	City & State					6. Election Campaign Financing	5.00	May Be		
23		28						Trust Fund Contribution	Added (	o Fees		
Zip	Country		Zip	Cou	ntry			8. This corporation owes the current year Intangib		_		
24	25 29			0				Personal Property Tax. Yes No				
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
						Name						
	GETT, A L JR				82 Street Address (P.O. Box Number is Not Acceptable)							
1001	0 CRYSTALLINE CT				Street Address (r. C. Dox Mainter is Not Nocephable)							
ORL	ANDO FL 32836				83					ĺ		
					0.4	City		85	Zip (	Code		
					84	City		FL  °°	'  £'P'	2006		
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	·							yher reinstating) DATE				
40	Signature, typed or printed name of registered agent a			13.	Agen	t signature re	duireo w	when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DI	RECTO	RS IN 12		
12.	OFFICERS AND	DIKE	DELETE	1,1 TI	n c				Change	Addition		
TITLE	P					İ						
NAME	LEGGETT, A L JR			1.2 N								
STREET ADDRESS	10010 CRYSTALLINE CT					ADDRESS				J		
CITY-ST-ZIP	ORLANDO FL			_	TY-ST	r-ZIP			Change	Addition		
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NAME	LEGGETT, DEBRA J			2.2 N				_ =				
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TITLE			☐ DELETE	61 T	TLE				Change	☐ Addition		
NAME				62 N	AME							
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4. 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 eath; 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 accurate with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/99 407-352-5400 Daytime Phone # CKZE034 (11/9)