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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

839556

(8)

TESING, INC.

**FILED** Mar 31 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address			
		4440 PGA BLVD			
STE 200 SUITE 600					
			PALM BEACH GARDENS FL 33410		DO NOT WRITE IN THIS SPACE
US		US			3. Date Incorporated or Qualified
2 Principal f	Place of Business	2a. Mailing Address			11/18/1977 4. FEI Number   Applied For
21 26		<del>                                     </del>			T Applied T Ci
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		60.75
27		27			5. Certificate of Status Desired Fee Required
City & State City &		City & State	y & State		6. Election Campaign Financing \$5.00 May Be
23 28					Trust Fund Contribution Added to Fees
Zip	Country Zip		Country	/	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. Yes No
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 81 Name					
CT CORPORATION SYSTEM			61	Ivaine	
1200 S. PINE ISLAND ROAD			82	Street A	Address (P.O. Box Number is Not Acceptable)
PLANTATION FL 33324			83		
ĺ			L		
			84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-pamed cornoration submits this statement for the purpose of changing its registerer					
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					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND	. <del> </del>	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		XX Change Addition
NAME			1.2 NAME STI		STEVEN NIELSEN
STREET ADDRESS 6523 NO BLACK CANYON HWY, PHOENIX AZ		WT, 51E 200			4440 PGA BOULEVARD, SUITE 600
CITY-ST-ZIP TITLE	S DELETE		1.4 CITY - 9 2.1 TITLE	T-ZIP	PALM BEACH GARDENS, FLORIDA 33410
NAME	EDITICO DITOIOLE D		2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS	1410 004 0110 075 000		2.3 STREET ADDRESS		
CITY-ST-ZIP	DALLA DEAGLE GARDENIO EL		2. 4 CITY+ST-ZIP		
TITLE	D DELETE		3.1 TITLE	-, -:"	☐ Change ☐ Addition
NAME	ADAMS, LOUIS W JR		3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL		3.4. CITY-	ST-ZIP	
TITLE	DV	DELET <b>e</b>	4.1 TITLE		Change Addition
NAME	PLEDGER, THOMAS R.		4. 2 NAME		
STREET ADDRESS	4440 PGA BLVD STE 600		4.3 STREET	ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL	Dr. Per	4.4 CITY - S	T-ZIP	
TITLE	BETIACH DOUGLAS I	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	BETLACH, DOUGLAS J 4440 PGA BLVD SUIT E600		5.2 NAME		
STREET ADDRESS	PALM BEACH GARDENS FL		5.3 STREET		
CITY-ST-ZIP TITLE	FALM DEACH GARDENS FL	DELETE	5.4 CITY-S	T-ZIP	Change Claddic-
NAME		m vireit	6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
STREET ADDRESS				ADDRESS	
CITY-ST-ZIP			6.3 STREET		
OUT OF ER			6.4 CITY-S	4- KIY	

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 congration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed on on an attachment with an address.