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**Apr 07, 1999 8:00 am**  
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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # F68133

1. Corporation Name  
**TECHNOLOGY PRODUCTS AND SERVICES, INC.**



Principal Place of Business: 2400 A VISION DRIVE, PALM BEACH GARDENS FL 33418 US  
 Mailing Address: PO BOX 31076, PALM BEACH GARDENS FL 33420 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/22/1982

4. FEI Number: 59-2246815 Applied For: Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax:  Yes  No

2. Principal Place of Business: 21 2401 VISION DRIVE, 22 Suite, Apt. #, etc., 23 Palm Beach Gardens, FL, 24 33418, 25 USA

2a. Mailing Address: 26 PO BOX 31076, 27 PALM BEACH GARDENS FL 33420, 28, 29, 30

9. Name and Address of Current Registered Agent: MCCUE, JAMES C., 2401-2400-A VISION DRIVE, PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent: 81 Name, 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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE: PD, NAME: MCCUE, JAMES C., STREET ADDRESS: 2400 A VISION DRIVE, CITY-ST-ZIP: PALM BCH GARDENS FL

TITLE: VDS, NAME: MCCUE, PAULINE E., STREET ADDRESS: 2400 A VISION DRIVE, CITY-ST-ZIP: PALM BCH GARDENS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS: 2401 VISION DRIVE, 1.4 CITY-ST-ZIP

2.1 TITLE, 2.2 NAME, 2.3 STREET ADDRESS: 2401 VISION DRIVE, 2.4 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: *James C. McCue* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3/29/99 5616222456 Date Daytime Phone #

CR2E034 (11/98)