

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000003798 (5)

1. Corporation Name

CHECK RITE LTD. INC.



Principal Place of Business

Mailing Address

7050 UNION PARK CENTER, STE 650
SUITE 200
MIDVALE UT 84047
US

7050 UNION PARK CENTER, STE 650
SUITE 200
MIDVALE UT 84047
US

3. Date Incorporated or Qualified

07/20/1994

3a. Date of Last Report

02/01/1995

2. Principal Place of Business

21 7050 Union Park Center

2a. Mailing Address

26 7050 Union Park Center

4. FEI Number

84-0743715

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Suite 200

Suite, Apt. #, etc.

27 Suite 200

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

23 Midvale, UT

City & State

28 Midvale, UT

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

24 84047

Country

25 U.S.

Zip

29 84047

Country

30 U.S.

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and, if applicable,

(NOTE: Registered Agent signature required when re-registering)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

☐ DELETE

NAME

CROCKETT, DENNIS

STREET ADDRESS

7050 UNION PARK CENTER, STE 650

CITY- ST- ZIP

MIDVALE UT

TITLE

VD

☐ DELETE

NAME

AUERBACH, NEIL

STREET ADDRESS

7050 UNION PARK CENTER, STE 650

CITY- ST- ZIP

MIDVALE UT

TITLE

V

☐ DELETE

NAME

EGAN, MICHAEL A

STREET ADDRESS

7050 UNION PARK CENTER, STE 650

CITY- ST- ZIP

MIDVALE UT

TITLE

T

☐ DELETE

NAME

HAWS, LARRY D

STREET ADDRESS

7050 UNION PARK CENTER, STE 650

CITY- ST- ZIP

MIDVALE UT

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

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CITY- ST- ZIP

TITLE

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Neil Auerbach

1/22/96

(801)568-1380

Date

Daytime Phone

CR2E034 (12/95)