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

PROFIT **CORPORATION ANNUAL REPORT** 1998 DOCUMENT # **BETAC CORPORATION** 

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 18 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

F9400006322 (1)

Principal Place	e of Business	Mailing	Address				<b>FR</b> HII <b>Genio dinol</b> diale di <b>on</b> 1889 (RD)
2001 N. BEAL	IRFGARD ST	-	N BEAUREGARD	et .			
SUITE 1100		SUITE		01			
ALEXANDRIA	VA 22311	ALEXA	NDRIA VA 22311			DO NOT WRITE IN	N THIS SPACE
						3. Date Incorporated or Qualified	
9 Oringinal Di	ace of Business		<del></del>			12/12/1994	·
<del></del>	ace of Busmoss	k	ling Address			4. FEI Number	Applied For
Suite, Apt.	# etc	26 Suite	e, Apt. #, etc.			54-1057313	Not Applicable
22	., •	27	o, Apr. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	<del></del>		& State		_	6. Election Campaign Financing	
23		28					\$5.00 May Be Added to Fees
Zip	Country	Zip	· · · · <del>- · · ·</del>	Countr	у	8. This corporation owes or has paid	
24	25	29		30		Personal Property Tax due June 30	
	9. Name and Address of Curre	ent Registered	Agent			10. Name and Address of New Regis	stered Agent
CT	CORPORATION SYSTEM			61	Name		
120	0 <b>\$</b> . PINE ISLAND RD			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·
PLA	INTATION FL 33324					railed (Fig. 20x Hamber to Het Necoptable)	,
				83	3		
				84	City		OF Tip Code
				1	'		FL 85 Zip Code
11. Pursuani t	o the provisions of Sections 607.0!	02 and 607.15	08, Florida Statul	tes, the above	e-named co	orporation submits this statement for the purp	pose of changing its registered
agent. I ar	n <b>fam</b> iliar with, and accept the obli	gations of, Sec	lion 60 <b>7.0505</b> , FI	adinorized L orida Statuto	is. Es	ration's board of directors. I hereby accept to	ine appointment as registered
SIGNATURE							
	Signature, typico or printed have of pequipole dia				jent signature red	quired when reinstating)	DATE
TITLE	OFFICERS A						·
HILE J	ro -	MO OWE CICK		13.		ADDITIONS/CHANGES TO OFFICER	····
lunar	CP EADLE	MATAINE CITOR	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12  Change Addition
NAME STORET ADDRESS	LOCKWOOD, EARL F			1.1 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OFFICER	····
STREET ADDRESS	LOCKWOOD, EARL F 2001 N. BEAUREGARD ST,			1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS	ADDITIONS/CHANGES TO OFFICER	····
STREET ADDRESS CITY-ST-ZIP	LOCKWOOD, EARL F 2001 N. BEAUREGARD ST, ALEXANDRIA VA 22311		DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-		ADDITIONS/CHANGES TO OFFICER	Change Addition
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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 convention 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 attraction within address.