

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

FILED

Apr 08 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # F96000002421 (3)

1. Corporation Name

VIRTUAL RESOURCES OF GEORGIA, INC.

Principal Place of Business

Mailing Address

490 SUN VALLEY DR  
BLDG 2  
ROSWELL GA 30076  
US

490 SUN VALLEY DR  
BLDG 2  
ROSWELL GA 30076  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1996

4. FEI Number

58-2121490

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 or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REYNOLDS, WAYNE  
32 MARINA ISLES BLVD.  
INDIAN AARBOUR BEACH FL 32937

81 Name

DAVID LEE

82 Street Address (P.O. Box Number is Not Acceptable)

8280 NW 183RD ST.

83

84 City

MIAMI

FL

85

Zip Code

33015

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]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-2-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

P  
NAME GLATTSTEIN, JEFFREY L  
STREET ADDRESS 3880 TRAILS END RD.  
CITY-ST-ZIP ROSWELL GA 30075

TITLE ☐ DELETE

V  
NAME CAMPION, NEAL  
STREET ADDRESS 1245 GABLES DR.  
CITY-ST-ZIP ATLANTA GA 30310

TITLE ☒ DELETE

S  
NAME DRESSER, DAN VAN  
STREET ADDRESS 2830 COACHMANS CIRCLE  
CITY-ST-ZIP ALPHARETTA GA

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE

CEO

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

8310 ST. MARLO FAIRWAY DR.

1.4 CITY-ST-ZIP

DULUTH, GA 30155

2.1 TITLE

CEO/SECRETARY

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

1092 ARBOR TRACE

2.4 CITY-ST-ZIP

ATLANTA, GA 30319

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

PRESIDENT/COO

☐ Change ☒ Addition

4.2 NAME

WILLIAM BROWDER

4.3 STREET ADDRESS

1080 LITTLE RIVER WAY

4.4 CITY-ST-ZIP

ALPHARETTA, GA 30601

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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

SIGNATURE:

*[Signature]*

3/25/98

770/445-7300

CR2E034 (10/97)