

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

FILED  
Mar 30 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 # F97000004321 (2)

1. Corporation Name

TELANTIS ASIA PACIFIC LTD., INC.

Principal Place of Business  
12501 WORLD PLAZA LANE  
FT. MYERS FL 33907

Mailing Address  
12501 WORLD PLAZA LANE  
FT. MYERS FL 33907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/15/1997

4. FEI Number

65-0761765

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 12511 WORLD PLAZA LANE

27 Suite, Apt. #, etc.

27 City & State

28 FT. MYERS, FLORIDA

29 Zip

33907

30 Country

USA

9. Name and Address of Current Registered Agent

ACCIPITER II, INC.  
12501 WORLD PLAZA LANE  
FT. MYERS FL 33907

10. Name and Address of New Registered Agent

81 Name

ACCIPITER II, INC.

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

12511 WORLD PLAZA LANE

83

84 City

FT. MYERS

FL

85 Zip Code

33907

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 607.0545, Florida Statutes.

SIGNATURE

DR. ROBERT F. MEYERSON

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

CCEO  
MEYERSON, ROBERT F  
16488 CAPTIVA ROAD  
CAPTIVA ISLAND FL 33924

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

PCOO  
MEYERSON, ADAM H  
791 WYE ROAD  
AKRON OH 44333

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VSD  
MURPHY, ELIZABETH S  
791 WYE ROAD  
AKRON OH 44333

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

AS  
RINGE, MAVIS  
12501 WORLD PLAZA LANE  
FT. MYERS FL 33907

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

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

☐ 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: DR. ROBERT F. MEYERSON

Signature, typed or printed name of signing officer or director

Date

(330)666-6380

Daytime Phone # 6020000

CP2E034 (10/97)