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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT#** 

## **FILED** Apr 01 1998 8:00am Secretary of State

	O TECHNOLOGIES CORPO	· ·	.*/			
Principal Place of Business Mailing Address						
7 ENTIN ROAD 7 ENTIN ROAD PARSIPPANY NJ 07054 PARSIPPANY NJ 07054			MC4			
FANOIFFANI	NO 0/004	FANOIFFANT NO U	· W		DO NOT WRITE IN TI	HIS SPACE
					3. Date Incorporated or Qualified	
9 Principal D	Place of Puripose	2a. Mailing Address			10/07/1997	
2. Principal Place of Business 21		26 Aboress			4, FEI Number 13-3506872	Applied For Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc.						\$8.75 Additional
22 27					5. Certificate of Status Desired	Fee Required
City & State City & Sta					6. Election Campaign Financing	\$5.00 May Be
23 28			7in On the		Trust Fund Contribution	Added to Fees
Zip	Country Zip		Count	ry	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	current year Intangible
24	25 9. Name and Address of Curr	29 ent Registered Agent	30		10. Name and Address of New Register	
Cr	ORPORATION SERVICE COMPA	<del></del>	В	1 Name	1081010	
	01 HAYS STREET	***	8:	2 Stroot Add	ress (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL 32301-2525			0.	Sileer Addi	ess (F.O. Box Number is Not Acceptable)	
			8:	3		
			8	4 City		85 Zip Code
11 Durewant	to the provisions of Speligus 607.0	502 and 607 1509 Florida 6	Statutes the abo	un nomed core	poration submits this statement for the purpos	EL es zip code
office or r	registered agent, or both, in the Sta	te of Florida, Such change	was authorized t	by the corporat	tion's board of directors. I hereby accept the	appointment as registered
	am ta miliar with and accept the onl	igations of, Section 607.050	5, Florida Statuti	es.	7/	رد عام
SIGNATURE	Sign (in the care printed name of registered a	agent and sile if applicable	(NOTE: Registered A	gent signature requir	red when reinstating) DAT	E 2253
12.	V OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	C	☐ DEL€T	E 1.1 TITLE			Change Addition
NAME			1.2 NAME			
STREET ADDRESS	LYON FRANCE		1.3 STREE	et address		
CITY-ST-ZIP	LYON, FRANCE CEOP	☐ DELET	1.4 CITY -			[] Ohanna [] 14499a
TITLE	VINCENT, HUGUES					Change Addition
NAME STREET ADDRESS	7 ENTIN ROAD		2.2 NAME			
CITY-ST-ZIP	PARSIPPANY NJ 07054		2.4 CITY	ET ADDRESS		
TITLE	V	DELET				Change Addition
NAME	GILMAN, KEVIN		3.2 NAME			
STREET ADDRESS	7 ENTIN ROAD		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	PARSIPPANY NJ 07054		3.4. CITY			
TITLE	VCFO	DELET	E 4.1 TITLE			Change Addition
NAME	STEHN, JOSEPH T		4. 2 NAMI	E		
STREET ADDRESS	7 ENTIN ROAD		4.3 STREE	T ADDRESS		
CITY-ST-ZIP	PARSIPPANY NJ 07054	T	4.4 CITY-			
TITLE	AS LEMMITOEE CARBUA	☐ DELET				Change Addition
NAME OTOTES 4000500	LEVINTOFF, CARINA 712 FIFTH AVE.		5.2 NAME			
STREET ADDRESS	NEW YORK NY 10019			T ADDRESS		
CITY-ST-ZIP TITLE	INCH TOUR HI INCH	☐ DELETI	5.4 CITY - 6.1 TITLE	SI-ZIP		Change Addition
NAME			6.1 TITLE			LT Change LT Modition
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-			

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 changes, or on an attachment with an address.

9/07/91